

CLIFFORD W RUSHING

ACCOUNT NUMBER

Detail Continues

Date	Description	Amount
07/14/16	CHARGE TO DUBBS, J P A 616-347-1121 DESCRIPTION AUTOMATED TUE. PLU'S	\$16.50 *
07/14/16	AMERICAN AIRLINES HURON - OH 614-411-3911	\$119.70 *
07/14/16	HAMPTON INN SCHOOL CASH	\$157.50 *
	Arrival Date: 07/13/16 Departure Date: 07/14/16	
	DESCRIPTION [REDACTED]	
	APPLE INC/USA APPLE ONLINE STORES	
	[REDACTED]	
	SEATTLE, WA 609-522-7441	
	DESCRIPTION APPAREL/HOME/ACC	
	[REDACTED]	
	EASTON, PA 610-345-0016	
	DESCRIPTION FOOTWEAR/ACCESSORIES	

Fees

Fee Type	Description	Amount
AMERICAN AIRLINES	Use the American Rewards® Points toward your annual membership fee www.members.rewards.com/career to learn more.	

Total Fees for this Period**Interest Charged**

Period	Interest Charged	Amount
07/01/16 - 07/14/16		

Total Interest Charged for this Period**About Trailing Interest**

You may see interest on your monthly statement even if you pay the new balance in full and on time and make no new charges. This is called trailing interest. Trailing interest is the interest on old debt. For example, you don't pay your previous balance off until the next month. Interest from the first day of the billing period that has passed will be charged. You can avoid paying interest on purchases by paying your balance in full and on time each month. Please see the terms and conditions in your cardholder agreement for details.

Account End:

P 47

Detail Continued

EASTON PA
800-654-0688

PALMER PA
8004449292

BETHLEHEM PA
610824070

Description
REFER TO RECEIPT

MARDI GRAS
RNEHO CORDOVA CA
866-261-4275

08/30/16

BGSU-E-COMMERCE PYMT-0383
BOWLING GREEN OH

419-372-7623

Description
TUITION/FEES

\$58.00

MAX FEE
MAX FEE

Amount

Fees

Total Fees for this Period

Amount

\$0.00

Interest charged

Total Interest Charged for this Period

Amount

\$0.00

About Trailing Interest

You may see interest on your next statement even if you pay the new balance in full and on time and make no new charges. This is called "trailing interest." Trailing interest is the interest charged when, for example, you didn't pay your previous balance in full. When that happens we charge interest from the first day of the billing period until we receive your payment in full. You can avoid paying interest on purchases by paying your balance in full and on time each month. Please see the "When we charge interest" sub-section in your Cardmember Agreement for details.



Available at
ohioturnpike.org
all Ohio Turnpike Service Plazas.

Why pay more?
E-ZPass saves you 33% on avg!



Available at ohioturnpike.org
all Ohio Turnpike Service Plazas.

OHIO TURNPIKE
www.ohioturnpike.org
14-Jul-16

Entry 218
Time 22:09
Exit 064
Lane 06
Time 00:28
Class 01 Axles 02
Collector# 100236
Payment:
Cash
Toll Due \$ 11.50
Paid \$ 11.50
Bal Due \$ 0.00

Why pay more for tolls?
E-ZPass saves you 33% on avg!

OHIO TURNPIKE
www.ohioturnpike.org
14-Jul-16

Entry 145
Time 18:56
Exit 218
Lane 09
Time 20:00
Class 01 Axles 02
Collector# 100236
Payment:
Cash
Toll Due \$ 5.50
Paid \$ 5.50
Bal Due \$ 0.00



Available at
ohioturnpike.org &
Ohio Turnpike Service Plazas.

OHIO TURNPIKE
www.ohioturnpike.org
14-Jul-16

Entry 064
Time 16:08
Exit 135
Lane 03
Time 17:11
Class 01 Axles 02
Payment:
Cash
Toll Due \$ 5.25
Paid \$ 5.25
Bal Due \$ 0.00

Why pay more for tolls?
E-ZPass saves you 33% on avg!



Available at ohioturnpike.org
Ohio Turnpike Service Plazas.

Toll
Both
travel
expenses

HURON, OHIO
419-433-2933

Server: Kim DOB: 07/14/2016
06:11 PM 07/14/2016
Table 13/1 2/20004

SALE

AMEX 2097157

Card #XXXXXXXXXX2003
Magnetic card present: RUSHING CLIFFORD W
Card Entry Method: S

Approval: 643422

Amount: \$ 94.70

+ Tip: _____

= Total: _____

I agree to pay the above
total amount according to the
card issuer agreement.

Thank you for dining with us.
Please come visit again.

07 05

ANGRY BULL



STEAK HOUSE, INC.

HURON, OHIO
419-433-2933

Server: Kim	07/14/2016
Table 13/1	6:08 PM
Guests: 4	20004

Iced Tea	2.25
Lemonade (2 @2.25)	4.50
8oz sirloin	19.99
Hash Browns	
ONIONS	
CHEESE	
Prime Rib Light (2 @22.99)	45.98
Chicken Alfredo	15.99
Subtotal	88.71
Tax	5.99
Total	94.70

Balance Due 94.70

Thank you for dining with us.
Please come visit again.

*Food
Expenses*

===== SUREPOS ACE Summary Receipt =====
Purchased from store 168

Value Card Activation: Approved
Value Card: TGIF 25.00
Card Number: ****6582
REF #: 437910578
AUTH #: 002500

06/10/15 09:57am 168 204 39 228

Expected Delivery Day: 02/17/2017

USPS TRACKING NUMBER



9505 5164 9831 7046 0205 66

PRESS FIRMLY TO SEAL

CPU



★ MAIL ★

FROM:

Fol:

170 Melo Rd
Easton PA 18040

- DATE OF DELIVERY SPECIFIED*
- USPS TRACKING™ INCLUDED*
- INSURANCE INCLUDED*
- PICKUP AVAILABLE

* Domestic only

To:

Dawling Case Administration

ClO GCGG

WHEN USED INTERNATIONALLY,
A CUSTOMS DECLARATION
LABEL MAY BE REQUIRED

P.O. Box 10342
Dublin, Ohio 43017

CLAIM NO. 445

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Dowling College	Case No. 16-75545
------------------------------------	----------------------

* P - D C O - P O C / 1 *

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Your Claim is Scheduled As Follows:

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	ANTHONY GEORGE		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Name 3885 KEILY DR Number Street SEAFORD, NY 11783 City State ZIP Code	Where should payments to the creditor be sent? Name Number Street City State ZIP Code	
	(516) 221-3548 Contact phone	Contact phone _____	
	GALAJ@VERIZON.NET Contact email	Contact email _____	
4. Does this claim amend one already filed	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proo of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		

* P - D C O - P O C / 2 *

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim?	\$ 40,319.00	Does this amount include interest or other charges? <input checked="" type="checkbox"/> Yes Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. I paid tuition for credits that are not transferrable toward the same degree at any other college.	
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No Yes. The claim is secured by a lien on property: Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____	
	Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).	
	Value of property: \$ _____	
	Amount of the claim that is secured: \$ 0.00	
	Amount of the claim that is unsecured: \$ 40,319.00 (The sum of the secured and unsecured amounts should match the amount in line 7.)	
	Amount necessary to cure any default as of the date of the petition: \$ _____	
	Annual Interest Rate (when case was filed) _____ Fixed Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No Yes. Identify the property: _____	
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No Yes. Check all that apply:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.		Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____
		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____
		Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____
		Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____
		Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____
		Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

* P - D C O - P O C / 3 *

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files
fraudulent claim could be
fined up to \$500,000
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 03/20/2017

MM / DD / YYYY

Anthony George

Signature

Print the name of the person who is completing and signing this claim:

Name

Anthony George

First name

Middle name

Last name

Title

Mr.

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

3885 Kelly Drive

Number Street

SEAFORD, NY 11783

City

State

ZIP Code

Contact phone

(516) 221-3548

Email **galaj@verizon.net**

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

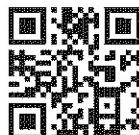
A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party** who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form

To Whom It May Concern,

This letter is being submitted to provide an explanation of the supporting documentation for the claim. I was a student at Dowling College. I completed three years of study there, earning 103 credits of the 128 needed to complete the Undergraduate Degree of BS in Aviation Management. There were specific degree requirements that had to be completed, unique to Dowling College. When Dowling closed, these credits were NOT part of the required curriculum at other colleges/universities that offer the same undergraduate degree. Thus, the credits CANNOT be used toward a degree at another institution, and I must comply with the other institution's degree requirements to earn my degree. Therefore, the money spent toward attaining credits at Dowling was wasted, as well as the time earning them.

Dowling College was one of the few colleges across the US that offered the Air Traffic Control Program, AT-CTI, which was approved by the FAA, in accordance with their standards for hiring Air Traffic Controllers. I researched many of the other schools offering the AT-CTI Program, and NONE of the institutions would honor Dowling's degree requirements and allow me to finish the degree I began. I am now being forced to complete the new college's degree requirements, and even though IT IS THE SAME UNDERGRADUATE DEGREE, it will take THREE years to complete!

Since Dowling College did not fulfill its obligation by issuing credits that would be usable toward this degree, or provide a reasonable method to complete the degree I began at Dowling (through a "Teach-Out Program that would have allowed me to finish the Dowling Degree at another college), Dowling is in Breach of Contract. In addition, the institution is guilty of Promissory Estoppel, and Unjust Enrichment. My tuition was given to them in exchange for credits toward a degree. Since the credits cannot be used toward my degree, I am entitled to a refund. Quite frankly, I am not even sure how to calculate the additional damages for my lost time, considering the extra YEARS of my life that will be spent to earn my undergraduate degree.

I fulfilled my end of the contract; I paid my tuition, registered for classes specified in the degree requirement curriculum, attended classes, and received passing grades. I had a reasonable expectation that I would be able to receive my degree.

I have attached supporting documentation, the paid tuition bills, totaling \$40,319., as follows:

<u>Semester</u>	<u>Tuition Paid</u>
Fall 2013	\$8720
Spring 2014	\$6880
Fall 2014	\$4160 (\$3276 and \$884 deposit)
Spring 2015	\$9610
Fall 2015	\$6089
Spring 2016	<u>\$4860</u>
	\$40319

Please contact me with any questions regarding this supporting documentation.

Thank you,



Anthony J. George

06/05/2013

Dowling College
STUDENT SCHEDULE/BILL
Fall 2013 (201309)

CRN	SUBJ	CRSE	COURSE TITLE	LV
-----	------	------	--------------	----

90286	ENG	1001A	Principles of Writing	01
90700	AER	1001N	General Aeronautics	01
90738	MTH	1002A	Fund of Mathematics	01
91228	AER	1003N	Aviation Weather	01
92620	FYE	1061A	On War	01

CHARGES		CREDITS/ANTICIPATED CREDITS	
College Fee	590.00	Tuition Deposit Check	225.00
Health Services Fee	100.00	NYS Tuition Assistance (TAP)	250.00
Student Activity Fee	75.00	UG Academic Honor Scholarship	5000.00
Technology Fee	135.00		
Undergraduate Tuition	13295.00		

1. Go to <http://bannerweb.edu> to pay by credit or debit card.

This is your Fall 2013 Tuition bill. Payment is due July 30, 2013.

Methods of Payment are as follows:

1. Go to <http://bannerweb.dowling.edu> to pay by credit or debit card.
2. Mail payment to Dowling College at 150 Idle Hour Boulevard, Oakdale N.Y. 11769

3. Pay in person at The Office of the Bursar located in Fortunoff Hall Room 101. The Bursar hours of operation are: Monday 8am - 5:00pm Tuesday through Friday 8am - 5pm.

Your Financial Aid is an ESTIMATE and subject to change. If your Financial Aid paperwork is not submitted, you will be responsible for payment of full TUITION & FEES.

If you have any questions, email bursar@dowling.edu or call the Office of the Bursar at 631-244-3013. This bill is confirmation of your registration.

Revw SLI 8/14

244-3013

WWW
- 180
555, 60)

Sever Total Current Term Charges: 14195.00
Total Current Term Credits: 5475.00

Previous/Other Term Balance:	0.00
Current Term Balance:	8720.00
AMOUNT DUE:	8720.00 ✓692
Future Balance:	0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201309
DATE DUE: 30-JUL-2013
AMOUNT DUE: 8720.00

Amount Paid: \$ _____

14-JUN-2013 16:14:12

Dowling College
Account Receipt 1019628PAGE 1
TGRRCEPT

CASHIER: OROURKEC

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

ID: 900586635

CODE	TERM	DESCRIPTION	TRAN DATE	CHARGE	PAYMENT
PY05	201309	MC Payment - Thank	14-JUN-13		\$1,154.00
TOTALS				\$.00	\$1,154.00

11/22/2013

Dowling College
STUDENT SCHEDULE/BILL
Winter/Spring 2014 (201402)

CRN	SUBJ	CRSE	COURSE TITLE	LV
-----	------	------	--------------	----

20234	PSY	3103C	Origins of Human Nat	01
20356	MGT	1011N	Intro to Mgt Theory	01
20462	AER	1002N	Comm.& Reg.Aspects o	01
20638	HST	1002C	World History II	01
23691	AER	2001N	General Aeronautics	01

===== CHARGES =====		===== CREDITS/ANTICIPATED CREDITS =====	
College Fee	590.00	Dowling UG Grant Freshmen	2375.00
Health Services Fee	100.00	UG Academic Honor Scholarship	5000.00
Student Activity Fee	75.00		
Technology Fee	135.00		
Undergraduate Tuition	13295.00		

This is your Winter/Spring 2014 Bill. Winter/Spring 2014 payment due date is December 12, 2013.

Methods of payment are as follows:

1. Go to <https://bannerweb.dowling.edu> to pay by credit or debit card.

2. Mail payments to Dowling College at 150 Idle Hour Blvd., Oakdale N.Y. 11769 ATTN: Office of the Bursar.

3. Pay in person, Fortunoff Hall, Room 101. Hours of operation:

Monday 8 am to 7 pm. Tuesday through Friday 8 am to 5 pm.

This bill is confirmation of your registration. Your Financial Aid is an estimate and subject to change. If your Financial Aid paperwork is not submitted, you will be responsible for full tuition and fees.

If you have any questions, email bursar@dowling.edu or finaid@dowling.edu. Please be sure to check your Dowling email and the Bursar web page, www.dowling.edu/bursar to learn about the Tuition Payment Options available for Winter/Spring 2014.

Mr. Anthony George
Student ID: 900586635
Campus: 1
Total Current Term Charges: 14195.00
Total Current Term Credits: 7375.00
Previous/Other Term Balance: 0.00
Current Term Balance: 6820.00
AMOUNT DUE: 6820.00
Future Balance: 0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201402
DATE DUE: 12-DEC-2013
AMOUNT DUE: 6820.00

Amount Paid: \$ _____



TUITION REPAYMENT AGREEMENT

Anthony George
Student Name (Please Print)

010586635
Student ID Number

axg96@dowling.edu
Dowling E-mail Address

3885 Kelly DR
Home Street Address

516 2213548
Daytime Telephone Number

Seaford NY 11783
City State Zip Code (+-4)

201409 15
Semester/Year # of Credits

UG X
Graduate or Undergraduate Dorm

1. Account Balance \$ <u>14,550.00</u>	Service Charge \$ <u>60.00</u>	= Total Account Balance Due,	\$ <u>14,610.00</u>
2. Estimated Financial Aid* \$ <u>10,250.00</u>	Deposits and Payments \$ <u>2834.00</u>	= Total Deductions.....	\$ <u>11,334.00</u>
3. Total Account Balance Due		=	\$ <u>3,276.00</u>
4. Payment Received with Repayment Agreement		=	\$ <u>0</u>
5. Total Repayment Amount (Total Account Balance Due - Payment Received with Repayment Agreement).....		=	\$ <u>3,276.00</u>
6. Total Repayment Amount \$ <u>3,276.00</u>	Number of Monthly Installments <u>2</u>	= Monthly Installment Amount*	\$ <u>1,638.00</u>

I agree to pay the Monthly Installment Amount each month no later than: 9/15/14 10/15/14 (x AFC initial here) ←

*All financial aid awards are considered estimated and may be subject to change.

CREDITOR	ANNUAL % RATE (APR)	APPLICATION FEE	AMOUNT FINANCED	TOTAL AMOUNT OF PAYMENTS	(x <u>AFC</u>) INITIAL HERE
Dowling College	Prime + 3% (SEE REVERSE)	\$ <u>60</u>	\$ <u>3,276.00</u> (LINE #5, ABOVE)	\$ <u>3,276.00</u> (LINE #5, ABOVE)	

Credit Card authorization is required when you enroll in the Monthly Installment Plan. You are authorizing the College to charge a designated credit card on a monthly basis. Only if payment is not received by the due date(s) indicated on the agreement for the semester will the credit card be charged for the installment amount. Debit Cards with a credit card logo are also accepted. If the College is unable to secure payment when processing this card, the above student account will be charged an additional late fee. The final monthly payment will be charged for the remaining balance on your student account for the semester, whether it is more or less than the agreed-upon installment amount.

→ I give Dowling College authorization to charge the MasterCard Visa American Express Discover Credit Card No. ending with the last four digits of 5621 in the amount of the Monthly Installment Amount on or about the stated payment dates, as well as the remaining balance on my student account for the semester for my final monthly payment, whether it is more or less than the agreed-upon installment amount.

→ Cardholder's Signature: Anthony George Date: 8/26/14 ←

I have read the Agreement Terms and Conditions on the back of this agreement and understood all provisions associated with this contract. I agree to pay Dowling College the amount(s) due as above set forth. Parent or guardian signature is needed if the student has not reached his or her 18th birthday.

→ Signature of Student: Anthony George Date: 8/26/14 Signature of Co-signer (Print Co-signer Name)

→ Credit/Debit Card: MasterCard Visa American Express Discover Credit Card No: 5424181176765621 ←

→ Expiration Date: 12/31/16 Authorization Code: 810 (the 4-digit # on front of American Express; the 3-digit # on back of MasterCard, Visa, Discover)

Cardholder's Name (as appears on card): Anthony F. George Jr

Cardholder's complete billing address: 3885 Kelly Drive

Zip code: 11783

Cardholder's Daytime Phone No.: 516-221-3548 Evening Phone No.: Cell Phone No.: 516 652 0574 ↘

Email Address: GALAS@VERIZON.NET

U.S. THIS
FIRST

SFS:05.13.2010

STUDENT FINANCIAL SERVICES

Dowling College • 150 Idle Hour Blvd. • Oakdale, NY 11769-1990

Phone: 1-800-DOWLING • Fax: 631-244-3370 • Email: finaid@dowling.edu



An institution of higher teaching

07-JUL-2014 09:28:05

Dowling College
Account Receipt 1040927PAGE 1
TGRRCPCT

CASHIER: DINAPOLIS

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

ID: 900586635

CODE	TERM	DESCRIPTION	TRAN DATE	CHARGE	PAYMENT
PY05	201409	MC Payment - Thank	07-JUL-14		\$884.00

TOTALS	\$.00	\$884.00
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07/07/2014

Dowling College
STUDENT SCHEDULE/BILL
Fall 2014 (201409)

CRN	SUBJ	CRSE	COURSE TITLE	LV
-----	------	------	--------------	----

90069	HST	1021C	United States I	01
90325	AER	2021N	Elements of Instrument Flying	01
90736	ACC	2001N	Intr to Financial Accounting 1	01 C
91114	POL	1001C	Intro to Political Sci	01
92139	CIS	1200N	Intro to Info Systems Mngment	01

1084-203

===== CHARGES =====		===== CREDITS/ANTICIPATED CREDITS =====
Undergraduate Tuition	14550.00	Early Payment Deduction 200.00
		MC Payment - Thank you 884.00
		Memoed Financial Aid -8216.00
		Grant in Aid Continuing 5000.00
		NYS Tuition Assistance (TAP) 250.00

* * * CONTINUED ON NEXT PAGE * * *

Mr. Anthony George
Student ID: 900586635
Campus: 1
Total Current Term Charges: 14550.00
Total Current Term Credits: 14550.00

Previous/Other Term Balance:	0.00
Current Term Balance:	0.00
AMOUNT DUE:	0.00
Future Balance:	0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201409
DATE DUE: 30-JUL-2014
AMOUNT DUE: 0.00

Amount Paid: \$ _____

06/30/2015

Dowling College
STUDENT SCHEDULE/BILL
Fall 2015 (201509)

Dowling ver
LOAN Repaym
ent

CRN	SUBJ	CRSE	COURSE TITLE	LV
90722	AER	3013N	Air Traffic Control	01
91466	AER	3114N	Basic Air Traffic Control Lab	01
92567	ESC	1010C	Elements of Meteorology	01
93562	MUS	1015C	Guitar Heroes	01
93913	PHL	1060C	Ethics in Criminal Justice	01

===== CHARGES =====		===== CREDITS/ANTICIPATED CREDITS =====	
Basic ATC Laboratory	500.00	Direct Loan - Subsidized	2721.00
Undergraduate Tuition	14550.00	Direct Unsubsidized Loan	990.00
		NYS Tuition Assistance (TAP)	250.00
		Grant in Aid Continuing	5000.00

* * * CONTINUED ON NEXT PAGE * * *

Mr. Anthony George
Student ID: 900586635
Campus: 1
Total Current Term Charges: 15050.00
Total Current Term Credits: 8961.00

Previous/Other Term Balance: 0.00
Current Term Balance: 6089.00
AMOUNT DUE: 6089.00
Future Balance: 0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201509
DATE DUE: 29-JUL-2015
AMOUNT DUE: 6089.00

Amount Paid: \$ _____

12/18/2014

Dowling College
STUDENT SCHEDULE/BILL
Winter/Spring 2015 (201502)

CRN	SUBJ	CRSE	COURSE TITLE	CREDS	LV
20018	ACC	2002N	Int to Financial Accounting II	3.00	01
20307	MGT	3146A	Organizational Behavior	3.00	01
20556	AER	2004N	Aviation Safety	3.00	01
20735	AER	2015N	Airport Management	3.00	01
20875	MTH	1006A	Statistics	3.00	01

Course Credits: 15.00

===== CHARGES ===== CREDITS/ANTICIPATED CREDITS =====
 Late Fee-Past Due 250.00 Grant in Aid Continuing 5000.00
 Undergraduate Tuition 14550.00 NYS Tuition Assistance (TAP) 250.00

===== Spring 2015 Tuition Payment was due on December 12, 2014. Registering on or after December 12, 2014 causes your tuition payment to be due upon receipt. Payment or Payment Arrangements MUST be made IMMEDIATELY. As of December 12, 2014 a \$250 late fee has been applied to your student account balance.

Payments received after January 2, 2015 will be subject to a \$500 late payment fee and may also result in having to re-register for classes on an as available basis.

Methods of Payment are as follows:

1. Go to <http://bannerweb.dowling.edu> to pay by credit/debit card or check.
2. Log into the Student Information System: Select "Make Payment /View Student Account".
3. Mail payment to Dowling College at 150 Idle Hour Boulevard, Oakdale N.Y. 11769 ATTN: Office of the Bursar
4. Pay in person at The Office of the Bursar located in Fortunoff Hall Room 101. The Bursar hours of operation are: Monday 8 am - 7 pm Tuesday through Friday 8am - 5pm.

Your Financial Aid is an ESTIMATE and subject to change. If your Financial Aid paperwork is not submitted, you will be responsible for payment of FULL TUITION & FEES.

If you have any questions, email bursar@dowling.edu or call the Office of the Bursar at 631-244-3013.

This bill is confirmation of your registration.

Mr. Anthony George
Student ID: 900586635
Campus: 1
Total Current Term Charges: 14800.00
Total Current Term Credits: 5250.00

Previous/Other Term Balance: 0.00
Current Term Balance: 9550.00
AMOUNT DUE: 9550.00
Future Balance: 0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201502
DATE DUE: 18-DEC-2014
AMOUNT DUE: 9550.00

Amount Paid: \$ _____

DOWLING**TUITION REPAYMENT AGREEMENT***Anthony George*

Student Name (Please Print)

900586685

Student ID Number

axg 96

Dowling.edu

P
2
2
3
4
5*3885 Keily Drive*

Home Street Address

516-221-3548

Daytime Telephone Number

Evening Telephone Number

Seaford NY 11783

City

State Zip Code (+ 4)

Semester Year

of Credits

UG

Dorm

1. Account Balance \$ <i>15,050</i>	Service Charge \$ <i>60</i>	= Total Account Balance Due.....	\$ <i>15,110</i>
2. Estimated Financial Aid* \$ <i>5250</i>	Deposits and Payments \$	= Total Deductions \$ <i>10,250</i>	\$ <i>5250</i>
3. Total Account Balance Due.....	<i>+ 5000</i>	= <i>10,250</i>	<i>4860</i>
4. Payment Received with Repayment Agreement.....		- <i>2465</i>	<i>2465</i>
5. Total Repayment Amount (Total Account Balance Due - Payment Received with Repayment Agreement).....		<i>2395</i>	<i>2395</i>
6. Total Repayment Amount \$ <i>2395</i>	: Number of Monthly Installments <i>3</i>	= Monthly Installment Amount* <i>798.33</i>	\$ <i>2395</i>

I agree to pay the Monthly installment Amount each month no later than: *2/1/16 - 4/1/16*

(initial here)

*All Financial Aid awards are considered estimated and may be subject to change.

CREDITOR	ANNUAL % RATE (APR)	APPLICATION FEE	AMOUNT FINANCED	TOTAL AMOUNT OF PAYMENTS	INITIAL HERE
Dowling College	Prime + 3% (see reverse)	\$ <i>100</i>	\$ <i>2395</i> (line #5, above)	\$ <i>2395</i> (line #5, above)	<i>DK</i>

Credit Card authorization is required when you enroll in the Monthly Installment Plan. You are authorizing the College to charge a designated credit card on a monthly basis. Only if payment is not received by the due date(s) indicated on the agreement for the semester will the credit card be charged for the installment amount. Debit Cards with a credit card logo are also accepted. If the College is unable to secure payment when processing this card, the above student account will be charged an additional late fee. The final monthly payment will be charged for the remaining balance on your student account for the semester, whether it is more or less than the agreed-upon installment amount.

I give Dowling College authorization to charge the MasterCard Visa American Express Discover Credit Card No. ending with the last four digits of *1234* in the amount of the Monthly Installment Amount on or about the stated payment dates, as well as the remaining balance on my student account for the semester for my final monthly payment, whether it is more or less than the agreed-upon installment amount.

Cardholder's Signature: *Anthony George*Date *12/21/15*

I have read the Agreement Terms and Conditions on the back of this agreement and understood all provisions associated with this contract. I agree to pay Dowling College the amount(s) due as above set forth. Parent or guardian signature is needed if the student has not reached his or her 18th birthday.

Signature of Student: *Anthony George*Date *12/21/15*

Signature of Co-signer

(Print Co-signer Name)

Credit/Debit Card: MasterCard Visa American Express Discover Credit Card No.: *12345678901234567890*

Expiration Date: _____ Authorization Code: _____ (the 4-digit # on front of American Express; the 3-digit # on back of MasterCard, Visa, Discover)

Cardholder's Name (as appears on card): *Anthony George*Cardholder's complete billing address: *Oneida*

Zip code: _____

Cardholder's Daytime Phone No.: _____

Evening Phone No.: _____

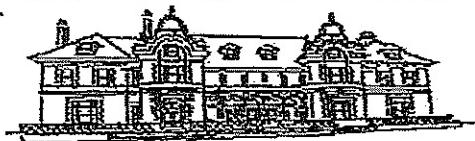
Cell Phone No.: _____

Email Address: _____

SFS:05.13.2010

STUDENT FINANCIAL SERVICES

Dowling College • 150 Idle Hour Blvd. • Oakdale, NY 11769-1999

Phone: 1-800-DOWLING • Fax: 631-244-3370 • Email: finaid@dowling.edu

An institution of higher teaching

12/18/2014

Dowling College
STUDENT SCHEDULE/BILL
Winter/Spring 2015 (201502)

CRN	SUBJ	CRSE	COURSE TITLE	CREDS	LV
20018	ACC	2002N	Int to Financial Accounting II	3.00	01
20307	MGT	3146A	Organizational Behavior	3.00	01
20556	AER	2004N	Aviation Safety	3.00	01
20735	AER	2015N	Airport Management	3.00	01
20875	MTH	1006A	Statistics	3.00	01

Course Credits: 15.00

===== CHARGES ===== CREDITS/ANTICIPATED CREDITS =====
 Late Fee-Past Due 250.00 Grant in Aid Continuing 5000.00
 Undergraduate Tuition 14550.00 NYS Tuition Assistance (TAP) 250.00

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4. Pay in person at The Office of the Bursar located in Fortunoff Hall Room 101. The Bursar hours of operation are: Monday 8 am - 7 pm Tuesday through Friday 8am - 5pm.

Your Financial Aid is an ESTIMATE and subject to change. If your Financial Aid paperwork is not submitted, you will be responsible for payment of FULL TUITION & FEES.

If you have any questions, email bursar@dowling.edu or call the Office of the Bursar at 631-244-3013.

This bill is confirmation of your registration.

Mr. Anthony George
Student ID: 900586635
Campus: 1
Total Current Term Charges: 14800.00
Total Current Term Credits: 5250.00

Previous/Other Term Balance: 0.00
Current Term Balance: 9550.00
AMOUNT DUE: 9550.00
Future Balance: 0.00

----- Return Bottom Portion With Payment -----

Mr. Anthony George
3885 Keily Dr
Seaford, NY 11783

Student ID: 900586635
Term: 201502
DATE DUE: 18-DEC-2014
AMOUNT DUE: 9550.00

Amount Paid: \$ _____

DOWLING**TUITION REPAYMENT AGREEMENT***Anthony George*

Student Name (Please Print)

900586685

Student ID Number

axg 96

Dowling.edu

P
2
2
3
4
5*3885 Keily Drive*

Home Street Address

516-221-3548

Daytime Telephone Number

Evening Telephone Number

Seaford NY 11783

City

State Zip Code (+ 4)

Semester Year

of Credits

*UG**—*

Graduate or Undergraduate

Dom

1. Account Balance \$ <i>15,050</i>	Service Charge \$ <i>60</i>	= Total Account Balance Due.....	\$ <i>15,110</i>
2. Estimated Financial Aid* \$ <i>5250</i>	Deposits and Payments \$ <i>—</i>	= Total Deductions \$ <i>10,250</i>	\$ <i>5250</i>
3. Total Account Balance Due.....	<i>+ 5000 = 10,250</i>	<i>- 4860 = 5395</i>	\$ <i>9860</i>
4. Payment Received with Repayment Agreement.....		<i>- 2465 = 2395</i>	\$ <i>2465</i>
5. Total Repayment Amount (Total Account Balance Due - Payment Received with Repayment Agreement).....			\$ <i>7395</i>
6. Total Repayment Amount \$ <i>2395</i>	: Number of Monthly Installments <i>3</i>	= Monthly Installment Amount* \$ <i>798.33</i>	\$ <i>2395</i>

I agree to pay the Monthly installment Amount each month no later than:

*2/1/16 - 4/1/16**(initial here)*

*All Financial Aid awards are considered estimated and may be subject to change.

CREDITOR	ANNUAL % RATE (APR)	APPLICATION FEE	AMOUNT FINANCED	TOTAL AMOUNT OF PAYMENTS	INITIAL HERE
Dowling College	Prime + 3% (see reverse)	\$ <i>100</i>	\$ <i>2395</i> (line #5, above)	\$ <i>2395</i> (line #5, above)	<i>✓</i>

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I give Dowling College authorization to charge the MasterCard Visa American Express Discover Credit Card No. ending with the last four digits of *1234* in the amount of the Monthly Installment Amount on or about the stated payment dates, as well as the remaining balance on my student account for the semester for my final monthly payment, whether it is more or less than the agreed-upon installment amount.

Cardholder's Signature: *Anthony George*Date *12/21/15*

I have read the Agreement Terms and Conditions on the back of this agreement and understood all provisions associated with this contract. I agree to pay Dowling College the amount(s) due as above set forth. Parent or guardian signature is needed if the student has not reached his or her 18th birthday.

Signature of Student: *Anthony George*Date *12/21/15*

Signature of Co-signer

(Print Co-signer Name)

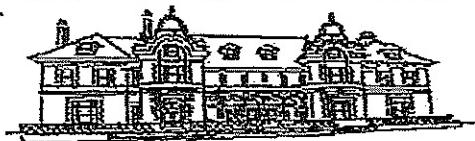
Credit/Debit Card: MasterCard Visa American Express Discover Credit Card No.: *—*Expiration Date: *—* Authorization Code: *—* (the 4-digit # on front of American Express; the 3-digit # on back of MasterCard, Visa, Discover)Cardholder's Name (as appears on card): *Anthony George*Cardholder's complete billing address: *On file*Zip code: *—*Cardholder's Daytime Phone No.: *—* Evening Phone No.: *—* Cell Phone No.: *—*Email Address: *—*

SFS:05.13.2010

STUDENT FINANCIAL SERVICES

Dowling College • 150 Idle Hour Blvd. • Oakdale, NY 11769-1999

Phone: 1-800-DOWLING • Fax: 631-244-3370 • Email: finaid@dowling.edu



An institution of higher teaching

CLAIM NO. 161

Claim # 161

Electronically Filed: 02/08/2017

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor:	Case No.
Dowling College	16-75545

Your Claim is Scheduled As Follows:

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filets must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?

ANTHONY GUEVARA

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

No

Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Where should notices to the creditor be sent?

Where should payments to the creditor be sent?
(if different)

ANTHONY GUEVARA

Name

Name

2712 CHESTNUT AVE

Number Street

Number Street

RONKONKOMA, NY 11779

City

State

ZIP Code

City

State

ZIP Code

Contact phone **(631) 615-6074**

Contact phone _____

Contact email **GUECAR@HOTMAIL.COM**

Contact email _____

4. Does this claim amend one already filed

No

Filed on _____ MM/DD/YYYY

Yes. Claim number on court claims registry (if known) _____

5. Do you know if anyone else has filed a proo of claim for this claim?

No

Yes. Who made the earlier filing? _____


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6.	Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7	How much is the claim?	\$ <u>7,275.00</u> Does this amount include interest or other charges? <input checked="" type="checkbox"/> No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. services
9.	Is all or part of the claim secured?	<input checked="" type="checkbox"/> No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____
		Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).
		Value of property: \$ _____
		Amount of the claim that is secured: \$ <u>0.00</u>
		Amount of the claim that is unsecured: \$ <u>7,275.00</u> (The sum of the secured and unsecured amounts should match the amount in line 7.)
		Amount necessary to cure any default as of the date of the petition: \$ _____
		Annual Interest Rate (when case was filed) _____ Fixed Variable
10.	Is this claim based on a lease?	<input checked="" type="checkbox"/> No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11.	Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No Yes. Identify the property:
12.	Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/08/2017

MM / DD / YYYY

Anthony guevara

Signature

Print the name of the person who is completing and signing this claim:

Name

Anthony guevara

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

2712 Chestnut Avenue

Number Street

RONKONKOMA, NY 11779

City

State

ZIP Code

Contact phone

Email guecar@hotmail.com

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS: IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. IF BY HAND OR OVERNIGHT COURIER: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41

Instructions for Proof of Claim

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed**
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been fil

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form

CLAIM NO. 246

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor:	Case No.
Dowling College	16-75545



IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200849074 01000243



ANTHONY KETTERER
2380 JULIA GOLDBACH AVE
RONKONKOMA NY 11779

FILED - 00248

EASTERN DISTRICT OF NEW YORK

DOWLING COLLEGE

16-75545/HONORABLE JUDGE ROBERT E. CROSSMAN

FEB 28 2017



If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410*

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?

Anthony Ketterer

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

No

Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Where should notices to the creditor be sent?

Where should payments to the creditor be sent?

(if different)

Anthony Ketterer

Name

2380 Julia Goldbach Ave.

Number Street

Ronkonkoma NY 11779

City State ZIP Code

Name

Number Street

City State ZIP Code

4. Does this claim amend one already filed?

No

Filed on

MM/DD/YYYY

Yes. Claim number on court claims registry (if known) _____

5. Do you know if anyone else has filed a proof of claim for this claim?

No

Yes. Who made the earlier filing? _____


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor.
7. How much is the claim?	(1) \$ <u>18,420.00</u> (2) \$ <u>35,297.00</u>
8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). <i>(See attached)</i> Limit disclosing information that is entitled to privacy, such as health care information. <i>Damages Services Not Rendered, Money spent in order to complete degree</i>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe _____
Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).	
Value of property: \$ _____	
Amount of the claim that is secured: \$ _____	
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)	
Amount necessary to cure any default as of the date of the petition: \$ _____	
Annual Interest Rate (when case was filed) % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property.
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply.
<p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p> <p><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____</p> <p><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____</p> <p><input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____</p> <p><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____</p> <p><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____</p> <p><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(...) that applies. \$ _____</p>	
*Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.	

U.S. Bankruptcy Court, District of Columbia, Case No. 16-22247-JK

REGISTRATION OF THE CHIEF CLERK
AND THE CLERKS OF THE COURT

NOTICE IS HEREBY GIVEN THAT THE CHIEF CLERK AND THE CLERKS OF THE COURT
OF THE DISTRICT OF COLUMBIA, IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF COLUMBIA, ARE REGISTERED AS FOLLOWS:

(1) JOHN R. HARRIS, JR., CHIEF CLERK, IN THE OFFICE OF THE CHIEF CLERK,

1100 L Street, N.W., Suite 1000, Washington, D.C. 20004.

NOTICE IS HEREBY GIVEN THAT THE CLERKS OF THE COURT ARE REGISTERED AS FOLLOWS:

JOHN R. HARRIS, JR., CHIEF CLERK, IN THE OFFICE OF THE CHIEF CLERK,

1100 L Street, N.W., Suite 1000, Washington, D.C. 20004.

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JOHN R. HARRIS, JR., CHIEF CLERK, IN THE OFFICE OF THE CHIEF CLERK,

1100 L Street, N.W., Suite 1000, Washington, D.C. 20004.


Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files a
fraudulent claim could be
fined up to \$500,000,
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true
and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 2/25/2017
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name .	<u>Anthony</u>	<u>Bill</u>	<u>Ketterer</u>
	First name	Middle name	Last name

Title	<u>Student</u>
-------	----------------

Company	Identify the corporate servicer as the company if the authorized agent is a servicer.		
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Address	<u>2380 Julia Goldback Ave.</u>		
Number	<u>2380</u>	Street	<u>Julia Goldback Ave.</u>
City	<u>Ronkonkoma</u>	State	<u>NY</u>
		ZIP Code	<u>11779</u>

Contact phone	<u>631-588-4507</u>	Email	<u>d1k920@optonline.net</u>
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IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

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 THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

February 25, 2017

Dowling College Case Administration

Attached is my proof of claims regarding the closure of Dowling College.

I was a graduate student enrolled at Dowling College at the time of its sudden closure. I was in the process of completing my Masters degree in Education in which I would have completed my requirements and received a degree in December 2016.

The unexpected closure of Dowling on very short notice and without regard to student needs has created financial and personal hardships. The sum of \$35,297.00 was paid to Dowling towards my Masters degree in Education. Dowling's breach of contract has left me without the degree I paid for and need to start my career. Yet, I have nothing to show for it. Therefore please see the attached proof of claim for \$35,297.00.

In order to fulfill the requirements to receive a degree from New York State, I was required to enroll in and pay for additional coursework that was not required as part of Dowling's curriculum. Therefore, please see my claim for additional out of pocket expenses of \$8,420.00.

Unfortunately, as of today I am still without a degree and certification which I should have received in December 2016. It is now approaching March 2017 and I am still waiting on the New York State process of approval. The state did not have a formal process in place to handle this situation and there is no guaranteed as to when, or if a degree will be granted. This has caused me financial hardship as I am not certified to apply for employment in education until I receive my degree and certification from New York State.

Please review the attached claims for reimbursement.

Thank you

Anthony Ketterer

1983-07-1600

Table 1. Estimated rates of decline, 1970-1975

2010-11-12 10:20:00 -0500 [INFO] [pid:1] [file:main.go:11] [line:1] [src:[https://github.com/segmentio/kafka-go](#)] [target:[https://kafka-tester.segment.io](#)] [method:GET] [path:/] [status:200] [latency:1.3ms]

6. In case of a dispute under this contract, the parties shall first attempt to settle it by friendly negotiations. If no agreement is reached, either party may refer the dispute to arbitration.

estabilhido por outras nações, contudo, o Brasil não é um dos países que mais investe em pesquisas e desenvolvimento, o que pode ser visto no gráfico.

Etat de la situation dans lequel se trouvent les deux derniers villages de l'île, et l'état des deux dernières îles que l'on peut visiter.

Stenocercus (*Sceloporus*) *leucostictus* (Baird & Girard)

卷之三

REFERENCES

Costs to complete degree due to Dowling Closure					
Paid to Molloy College	10/12/2016	\$ 6,570.00	(15)	529 college savings acct	
Paid to Molloy College	8/25/2016	\$ 400.00	(16)	Southwest Visa credit card	
Payment for transcripts	6/1/2016	\$ 50.00	(17)	cash	
Dowling credit voucher	4/18/2016	\$ 1,400.00	(2)	voucher (3 credits)	
Total Paid Out due to closure		\$ 8,420.00			

As a result of the Dowling closure the following out of pocket expenditures were incurred in order to complete the degree:

(15) - Payment to Molloy college to complete prgram requirements. As per NYS guidelines additional courses required to fulfill curriculum.

(16) - Deposit paid to Molloy college for registration into their program.

(17) - As a result of school closure, payment to Dowling for transcripts needed to apply to other institutions in order to complete degree .

(2) As a result of the Dowling closure, a credit voucher for 3 credit hours was not redeemable. Valued at \$3,480, paid out of pocket \$1,400.

The unexpected closure of Dowling on very short notice and without regard to student needs has created financial and personal hardships. The sum of \$35,297 was paid to Dowling towards my Masters degree in Education, yet I have nothing to show for it. I shoud have completed classes and received my degree in Decemebr 2016. However, as a result of the closure I had to seek out completion of my requirements from another institution and a degree from New York State. The process has cost me additional expenses and has pushed back my ability to seek work for several months. The granting of my degree and certification from New York State has been tied up in the system for months and is still pending. I am unable to seek employment until I receive the degree and certification.

or better yet, consider matching the existing `EMBED` tag. This will ensure that the image is displayed correctly in all browsers.

Първото място по количеството на използвани въглища има Унгария - 17,1

Georgian Revival style building of brick with a tiled roof and a central tower with a copper dome. A-1811

Brno (CZ) E27 žárovky s výkonem 10W, 230V, teplota světla 3000K, životnost 2000 hodin, cena za kus

תפקידם בצדדים השונים של אבן החצץ או היבול. מילויים אלה מושגים על ידי קבוצת מלחים, שמייצרת מלחים ניטרליים, ומייצרת מלחים אקטיביים, שמייצרים מלחים פעילים.

Thank you for your request. We have processed your request as of the trade date indicated below. However, please be aware that due to a recent contribution to your account, the proceeds from this withdrawal will be held until 10/14/2016. Proceeds by check or Electronic Bank Transfer will be released to the requested recipient within three days of this date in accordance with our contribution hold policy.

Please Note: If you have chosen to receive your withdrawal by check, the proceeds have been mailed in a separate envelope.

Investment Transactions

Trade Date	Portfolio Name	Units Transacted	Unit Price	Transaction Amount	Transaction Description
10/12/2016	Moderate Age-Based Option: Income Portfolio	-425,2425	15.45	-\$6,570.00	Qualified w/d Educational Institution Check molloy college 15

If this contribution to your New York's 529 College Savings Program *Direct Plan* account is a rollover from another state's 529 plan, a Coverdell Education Savings Account, or a U. S. Savings Bond, you must provide documentation related to the principal and earnings portion of your assets for tax purposes. If we do not receive this information, your contribution will be designated as 100% earnings and will be fully taxable at distribution.

- **529 Plan Assets** (held in another state's plan): Provide an account statement issued by the state's 529 program which shows the earnings or loss portion of your withdrawal.
- **Coverdell Education Savings Accounts:** Provide an account statement or documentation issued by the account custodian that shows the basis and earnings in your account.
- **U.S. Savings Bond:** Provide an account statement or IRS Form 1099-INT from the redeeming institution that shows the interest which has accrued on the bond.

Please note your contributions will be allocated according to your most recent investment allocation instructions.

New York's 529 College Savings Program *Direct Plan* is described in the current applicable Program Brochure and Tuition Savings Agreement. Accounts are opened by completing an Enrollment Form. All of these should be read carefully before opening an account. The value of your account will vary based on market conditions and the performance of the investment options you select, and may be more or less than the amount you deposit. Tax benefits are subject to certain limitations and certain withdrawals are subject to federal, state and local taxes. If you are a resident or taxpayer of another state, you should consider whether that state offers a 529 Plan with tax or other benefits that are not available through this Program. You should consult your tax advisor. Investments may be made through Ascensus Broker Dealer Services, Inc. and Vanguard Marketing Corporation, as distributors.

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P.O. BOX 15123
WILMINGTON, DE
19850-5123

Got updates on the go?
Log on to chase.com/alerts

Payment Due Date:	10/06/16
New Balance:	\$4,606.15
Minimum Payment:	\$46.00

Account number: [REDACTED]

51418 BXZ 25316 C
DENISE L KETTERER
2380 JULIA GOLDBACH AVE
RONKONKOMA NY 11779-6317

S _____ Amount Enclosed
Make your check payable to: Chase Card Services

CARDMEMBER SERVICE
PO BOX 1423
CHARLOTTE NC 28201-1423

Southwest® Rapid Rewards®



Manage your account online:
www.chase.com/southwest



Customer Service:
1-800-797-6001



Mobile: Visit chase.com
on your mobile browser

ACCOUNT SUMMARY

Account Number:	[REDACTED]
Previous Balance	\$3,766.79
Payment, Credits	-\$3,766.79
Purchases	+\$4,606.15
Cash Advances	\$0.00
Balance Transfers	\$0.00
Fees Charged	\$0.00
Interest Charged	\$0.00
New Balance	\$4,606.15
Opening/Closing Date	08/10/16 - 09/09/16
Credit Access Line	\$12,700
Available Credit	\$8,093
Cash Access Line	\$2,540
Available for Cash	\$2,540
Past Due Amount	\$0.00
Balance over the Credit Access Line	\$0.00

PAYMENT INFORMATION

New Balance	\$4,606.15
Payment Due Date	10/06/16
Minimum Payment Due	\$46.00

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee of up to \$37.00.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	18 years	\$9,812
\$161	3 years	\$5,796 (Savings=\$4,016)

If you would like information about credit counseling services, call 1-866-797-2885.

YOUR ACCOUNT MESSAGES

New York Residents: New York residents may contact the New York State Department of Financial Services at 1-800-342-3756 or go to www.dfs.ny.gov to obtain a comparative list of credit card rates, fees, and grace periods.

SOUTHWEST AIRLINES RAPID REWARDS CARD SUMMARY

- + 2X Pts for Southwest purchases
- + Points earned on purchases
- Total Rapid Rewards transf. to Southwest

- 0 Learn more about your Rapid Rewards® Credit Card at www.chase.com/southwest. View point totals and redeem at www.southwest.com/maccount. Call 1-800-FLY-SWA or visit www.southwest.com to book flights.

Earn 2 Rapid Rewards® Points per \$1 spent on flights purchased directly through Southwest Airlines® and on participating Rapid Rewards Hotel and Rental Car partner purchases. (Like Marriott, Hyatt, Hertz and Avis) Escape faster by earning 1 point per \$1 on all other purchases.

ACCOUNT ACTIVITY

Date of Transaction	Merchant Name or Transaction Description	\$ Amount
PAYMENTS AND OTHER CREDITS		
09/02	Payment Thank You - Chase Bill Pay	-\$3,766.79
PURCHASES		
08/13	KING KULLEN #1 PATCHOGUE NY	70.04
08/14	OnStar 888-4ONSTAR MT	27.14
08/17	QUINNIPAC UNIVERSITY 203-5823460 CT	500.00
08/23	MOLLOY COLLEGE BUSPAR 516-229-4110 NY	400.00
08/26	WAL-MART #3545 HAMDEN CT	164.47
08/26	STAPLES 00104463 HAMDEN CT	42.39
08/28	IHOP 2080 HAMDEN CT	31.07
08/27	STEWARTS SHOP 248 ELLENVILLE NY	23.54
08/28	SPEEDWAY 07860 RONKONKOMA NY	19.00

This Statement is a Facsimile - Not an original

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2. *Artemesia* (Artemisia) *absinthium* L. (A. *absinthium* L.)

1980-1981

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1. Produktions- qualität, techn. g. fertig	2. Produktions- zeit, techn. g. fertig	3. Materialien und Verbrauch der Fertigung, einschl. Zulage	4. Kosten der Fertigung	5. Kosten der Verarbeitung
91,95	77,11	100,00	100,00	100,00
75	75	75	75	75
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On 19th Dec 1934 I had a walk with Mr. G. H. D. Smith, Mr. J. C. M. and Mr. W. H. G. We went to the northern part of the park and found a number of birds.

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THE ENCLOSED TRANSCRIPT IS SENT TO YOU AT THE REQUEST OF:

Last Name Katter First Name Anthony Middle _____
 Address 1380 Julia Goldbach Ave Apt. # 111FC
 City Brentwood State NY Zip + 4 11717
 Home Phone Number (631) 588-4507 Business Phone Number ()
 Social Security Number or Student Identification Number 900-625-647
 Student's Signature Dee Katter Date _____

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- PLEASE HOLD UNTIL DEGREE IS POSTED.
- PLEASE SEND 5 COPIES TO THE ADDRESS GIVEN BELOW.

MAIL OFFICIAL TRANSCRIPT TO (PLEASE PRINT CLEARLY):

Name:
P.O. Box:
Street Address:
City & State:
Zip + 4:

REQUESTS MUST BE RECEIVED AT LEAST ONE WEEK BEFORE TRANSCRIPT IS NEEDED.

INDICATE ACADEMIC LEVEL:

- Undergraduate
 Graduate
 Professional Diploma or Advanced Certificate
 Doctoral

Dates Attended _____

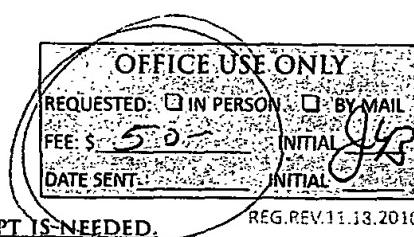
 GraduatedM.S Ed

Degree and Year _____

Name while in attendance, if different _____

Please enter your email address [to receive confirmation that your Transcript Request has been processed]:

Email: _____



REG.REV.11.13.2010

11

Certificate #: 2013-09-050

Expiration Date: Feb 2017



TUITION WAIVER CERTIFICATE

Cooperating Teacher:

Mary Ellen Harkin
96 Taxes Lane
Cinnerton NY

Credit Hours: 13

Awarded credit hours are based on the average full cost per term

Student-Teacher: Christina Schreder

School District: Concord

Robert J. Manley

Signature of authorized college official

I do not wish to use this Tuition Waiver Certificate;
Therefore, I am transferring it to:

Name Anthony Ketterer

Address 2380 Julia Goldbach Ave.
Ronkonkoma, NY

Semester waiver is to be applied to:

Mary Ellen Harkin
Cooperating teacher signature

TUITION WAIVER POLICIES AND PROCEDURES

1. The authorized holder must have a valid admissions application on file and be approved by the College for the registered course work.
2. A combination of certificates may be applied to a combination of courses; for example two 1.5 credit hour Tuition Waiver certificates may be applied to one three credit hour course. Tuition Waivers may be applied up to a maximum of six credit hours per semester.
3. If a certificate (s) is applied to a course (s) of less than the maximum values of the hours allowable, the value of the credit hours remaining are cancelled. Credits/refunds will not be given.
4. Authorized holders are responsible for credit hour charges in excess of the weighted average of hours allowable on the certificate (s). Tuition waiver certificates cover tuition charges only. Certificates do not exempt the holder from tuition related fees or other charges.
5. Tuition Waiver Certificates must be submitted prior to the official start of the semester.
6. Excluded from the awarding of the Tuition Waiver Certificate is the Ed.D program, SCOPE onsite classes and certain other programs determined by the college.
7. Tuition Waiver Certificates may be transferred. Please complete the appropriate areas on the top of this certificate in order to transfer award.
8. A Tuition Waiver that has been submitted for a course will not be returned if the student withdraws or does not attend the course(s). The Tuition Waiver Certificate will be forfeited.
9. Tuition Waiver Certificates are a form of financial aid and considered institutional aid. They cannot be awarded retroactively. If the student is receiving additional institutional financial aid the student's financial aids maybe adjusted accordingly.

I have read the policies and procedures governing the tuition waiver program contained on the bottom of this certificate and my signature confirms my intent to comply.

Christina Schreder

Signature of authorized certificate holder

900625647

Student ID #

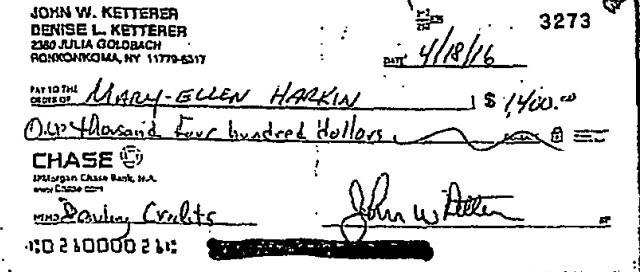
SCHOOL OF EDUCATION - STUDENT TEACHER PLACEMENT

Rudolph-Oakdale Campus | P: 631.244.3286 | F: 631.244.5036
Education@Dowling.edu | Dowling.edu

Rudolph-Oakdale Campus, 150 Idle Hour Boulevard, Oakdale, New York 11769
Brookhaven Campus, 1300 William Floyd Parkway, Shirley, New York 11957
Mehlville Center, 145 Pinelawn Road, Suite 350 South, Melville, New York 11747

JPMORGAN CHASE & CO.

Post date: 05/02/2016
Amount: \$ 1400.00



Account: [REDACTED]
Check Number: 3273

Capital One, N.A. Richmond VA 065000090
0020910342 05022016
462051YZ1180620160502000085395109

>065000090<
CAPITAL ONE, NA
0020910342 05022016
RICHMOND, VA 16522
Deposit 3826014759

Mary-Ellen Harkin
3826014759

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Dowling College Payments					
Semester	Date	Amt		Funding Source	
Summer 2016	5/14/2016	\$ 477.00	(1)	529 college savings acct	
		\$ 477.00			
Spring 2016	3/1/2016	\$ 1,622.00	(3)	529 college savings acct	
	2/5/2016	\$ 2,202.00	(4)	529 college savings acct	
	1/4/2016	\$ 2,202.00	(5)	529 college savings acct	
	12/9/2015	\$ 2,202.00	(6)	529 college savings acct	
	11/24/2015	\$ 2,202.00	(7)	Chase Freedom credit card	
		\$ 10,430.00			
Fall 2015	10/19/2015	\$ 2,214.00	(8)	529 college savings acct	
	9/14/2015	\$ 2,934.00	(9)	529 college savings acct	
	8/19/2015	\$ 2,934.00	(10)	529 college savings acct	
	7/21/2015	\$ 2,934.00	(11)	529 college savings acct	
	7/7/2015	\$ 2,934.00	(12)	Chase Freedom credit card	
		\$ 13,950.00			
Summer 2015	6/26/2015	\$ 3,480.00	(13)	529 college savings acct	
		\$ 3,480.00			
Spring 2015	5/8/2015	\$ 6,735.00	(14)	529 college savings acct	
	5/1/2015	\$ 225.00			
		\$ 6,960.00			
Total Dowling		\$ 35,297.00			

Investment Summary (Continued)

Total Portfolio Net Worth:	\$721.87
Principal:	\$682.38
Earnings:	\$39.49

Annualized Personal Rate of Return (as of 09/30/2016)	1 Year	3 Year	5 Year	10 Year
	2.56%	N/A	N/A	N/A

A note about performance. Your personal performance is based on the performance of your investments and on the timing and amount of your purchases and redemptions. Therefore, your personal performance may differ—perhaps greatly—from the performance of the investments themselves.

Calculation method. Personal performance uses a formula called *internal rate of return* (IRR), which is a dollar-weighted return. IRR takes into account new money coming into your investment, as well as how long that money has been held. Don't confuse your personal rate of return with those posted for funds and indexes. The returns presented in these instances use a time-weighted calculation, which does not take cash flow into consideration.

Past performance. Past performance is not a guarantee of future performance. You should monitor your personal performance over an extended period of time and consider other factors—investment objectives, time horizon, risk tolerance, personal financial situation, and tax implications—before making changes to your portfolio.

Performance presented is for applicable time frames since initial investment. Accounts with a zero balance at either the beginning or end of the time period shown will not calculate a personal rate of return and hence will show a zero return.

Investment Allocations

(As of 09/30/2016)

Portfolio Name	Allocation Percentage *
Moderate Age-Based Option: Income Portfolio	100%

* Investment allocations are effective for all future contributions and do not necessarily reflect the current allocation of assets in your account.

Investment Transactions

January 1, 2016 - September 30, 2016

Trade Date	Portfolio Name	Units Transacted	Unit Price	Transaction Amount	Transaction Description
05/04/2016	Moderate Age-Based Option: Income Portfolio	-31.2174	\$15.28	-\$477.00	1 Qualified w/d Educational Institution Dowling College
03/01/2016	Moderate Age-Based Option: Income Portfolio	-110.0660	\$15.10	-\$1,662.00	2 Qualified w/d Educational Institution Dowling College
02/05/2016	Moderate Age-Based Option: Income Portfolio	-146.1182	\$15.07	-\$2,202.00	3 Qualified w/d Educational Institution Dowling College
01/04/2016	Moderate Age-Based Option: Income Portfolio	-147.4882	\$14.93	-\$2,202.00	4 Qualified w/d Educational Institution Dowling College

Investment Summary (Continued)

Annualized Personal Rate of Return (as of 12/31/2015)	1 Year -0.89%	3 Year N/A	5 Year N/A	10 Year N/A
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A note about performance. Your personal performance is based on the performance of your investments and on the timing and amount of your purchases and redemptions. Therefore, your personal performance may differ—perhaps greatly—from the performance of the investments themselves.

Calculation method. Personal performance uses a formula called *internal rate of return* (IRR), which is a dollar-weighted return. IRR takes into account new money coming into your investment, as well as how long that money has been held. Don't confuse your personal rate of return with those posted for funds and indexes. The returns presented in these instances use a time-weighted calculation, which does not take cash flow into consideration.

Past performance. Past performance is not a guarantee of future performance. You should monitor your personal performance over an extended period of time and consider other factors—investment objectives, time horizon, risk tolerance, personal financial situation, and tax implications—before making changes to your portfolio.

Performance presented is for applicable time frames since initial investment. Accounts with a zero balance at either the beginning or end of the time period shown will not calculate a personal rate of return and hence will show a zero return.

Investment Allocations

(As of 12/31/2015)

Portfolio Name	Allocation Percentage *
Moderate Age-Based Option: Income Portfolio	100%

* Investment allocations are effective for all future contributions and do not necessarily reflect the current allocation of assets in your account.

Investment Transactions

January 1, 2015 - December 31, 2015

Trade Date	Portfolio Name	Units Transacted	Unit Price	Transaction Amount	Transaction Description
12/09/2015	Moderate Age-Based Option: Income Portfolio	-147.3896	\$14.94	-\$2,202.00	Qualified w/d Educational Institution Dowling College
11/30/2015	Moderate Age-Based Option: Income Portfolio	133.7793	\$14.95	\$2,000.00	2015 Contribution Check
11/11/2015	Moderate Age-Based Option: Income Portfolio	67.1592	\$14.89	\$1,000.00	2015 Contribution Check
10/20/2015	Moderate Age-Based Option: Income Portfolio	334.2246	\$14.96	\$5,000.00	2015 Contribution Check
10/19/2015	Moderate Age-Based Option: Income Portfolio	-147.7970	\$14.98	-\$2,214.00	Qualified w/d Educational Institution Dowling College
09/18/2015	Moderate Age-Based Option: Income Portfolio	66.9344	\$14.94	\$1,000.00	2015 Contribution Check
09/14/2015	Moderate Age-Based Option: Income Portfolio	-196.7806	\$14.91	-\$2,934.00	Qualified w/d Educational Institution Dowling College
08/19/2015	Moderate Age-Based Option: Income Portfolio	-196.5172	\$14.93	-\$2,934.00	Qualified w/d Educational Institution Dowling College
07/21/2015	Moderate Age-Based Option: Income Portfolio	-197.3100	\$14.87	-\$2,934.00	Qualified w/d Educational Institution Dowling College
07/06/2015	Moderate Age-Based Option: Income Portfolio	134.2283	\$14.90	\$2,000.00	Transfer In
06/26/2015	Moderate Age-Based Option: Income Portfolio	-235.2940	\$14.79	-\$3,480.00	Qualified w/d Educational Institution Dowling College
05/08/2015	Moderate Age-Based Option: Income Portfolio	-450.2004	\$14.96	-\$6,735.00	Qualified w/d Educational Institution Dowling College
05/04/2015	Moderate Age-Based Option: Income Portfolio	1,002.0039	\$14.97	\$15,000.00	Transfer In

October 1, 2015 - December 31, 2015

Manage your account online:
www.chase.com/freedomCustomer Service:
1-800-524-3880Mobile: Visit chase.com
on your mobile browser**ACCOUNT ACTIVITY**

(CONTINUED)

Date of Transaction	Merchant Name or Transaction Description	\$ Amount
11/22	KING KULLEN #10 LAKE RONKONKO NY	89.66
11/21	SUNOCO 0350576503 RONKONKOMA NY	30.59
11/21	TWO LIZARDS RESTAURANT NEW YORK NY	149.12
11/24	DOWLING COLLEGE BURSAR 691/2443018 NY	1,220.00
11/26	MICROSOFT *XBOXLIVE 800-469-9269 WA	10.85
11/25	OCEAN CLEANERS RONKONKOMA NY	52.00
11/26	JOE'S SIRLOIN BURGER & G BOHEMIA NY	12.58
12/03	FLOURISHING TRADE CO.,LTD YIWU	162.57
12/03	LIDS 5097 LAKE GROVE NY	50.00
12/03	PERSONALIZED ORNAMENTS SH LAKE GROVE NY	84.67
12/03	WOOPS SMITH HAVEN LAKE GROVE NY	32.00
12/05	THREE STAR ON FIRST NEW YORK NY	48.50
12/07	STOP & SHOP 0544 LK RONKONKOMA NY	93.00

2015 Totals Year-to-Date

Total fees charged in 2015	\$5.12
Total interest charged in 2015	\$0.00

Year-to-date totals do not reflect any fee or interest refunds you may have received.

INTEREST CHARGES

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

Balance Type	Annual Percentage Rate (APR)	Balance Subject To Interest Rate	Interest Charges
PURCHASES			
Purchases	12.99% (v)	-0-	-0-
CASH ADVANCES			
Cash Advances	23.99% (v)	-0-	-0-
BALANCE TRANSFERS			
Balance Transfer	12.99% (v)	-0-	-0-

(v) = Variable Rate

30 Days in Billing Period

Please see Information About Your Account section for the Calculation of Balance Subject to Interest Rate, Annual Renewal Notice, How to Avoid Interest on Purchases, and other important information, as applicable.





P.O. BOX 15123
WILMINGTON, DE
19850-5123

Payment Due Date:	09/05/15
New Balance:	\$3,913.99
Minimum Payment:	\$39.00

Account number: [REDACTED]

43498 BX Z 22015 C
DENISE L KETTERER
2380 JULIA GOLDBACH AVE
RONKONKOMA NY 11779-6317

\$ _____ Amount Enclosed
Make your check payable to: Chase Card Services

CARDMEMBER SERVICE
PO BOX 15153
WILMINGTON DE 19886-5153



Manage your account online:
www.chase.com/freedom

Customer Service: 1-800-524-9880 Mobile: Visit chase.com on your mobile browser

ACCOUNT SUMMARY

Account Number:	[REDACTED]
Previous Balance	\$968.53
Payment, Credits	-\$979.36
Purchases	+\$3,924.82
Cash Advances	\$0.00
Balance Transfers	\$0.00
Fees Charged	\$0.00
Interest Charged	\$0.00
New Balance	\$3,913.99
Opening/Closing Date	07/09/15 - 08/08/15
Credit Access Line	\$8,000
Available Credit	\$4,086
Cash Access Line	\$1,600
Available for Cash	\$1,600
Past Due Amount	\$0.00
Balance over the Credit Access Line	\$0.00

PAYMENT INFORMATION

New Balance	\$3,913.99
Payment Due Date	09/05/15
Minimum Payment Due	\$39.00

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee of up to \$35.00.

Minimum Payment Warning: If you make only the minimum payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay...	You will pay off the balance shown on this statement in about...	And you will end up paying an estimated total of...
Only the minimum payment	16 years	\$7,453
\$132	3 years	\$4,752 (Savings=\$2,701)

If you would like information about credit counseling services, call 1-866-797-2885.

YOUR ACCOUNT MESSAGES

New York Residents: New York residents may contact the New York State Department of Financial Services at 1-800-342-3735 or go to www.dfs.ny.gov to obtain a comparative list of credit card rates, fees, and grace periods.

CHASE FREEDOM® ULTIMATE REWARDS® SUMMARY

Previous points balance	2,912	Redeeming your points for Cash Back rewards is easy!
+ 1% (1 Pt)/\$1 earned on all purchases	3,914	For example, 2,000 points = \$20 Cash Back rewards.
+ 1% (1 Pt)/\$1 on Ultimate Rewards travel	0	To review your reward options visit chase.com/freedom .
+ Bonus from 3Q 5% category: Gas stations	252	
= Total points available for redemption	7,078	

You always earn unlimited 1% cash back on all your purchases. Activate new bonus categories every quarter. You'll earn an additional 4% cash back, for a total of 5% cash back on up to \$1,500 in combined bonus category purchases each quarter. Activate for free at chase.com/freedom, visit a Chase branch or call the number on the back of your card.

ACCOUNT ACTIVITY

Date of Transaction	Merchant Name or Transaction Description	\$ Amount
08/03	Payment Thank You - Chase Bill Pay	-968.53
08/05	WAL-MART #2917 ISLANDIA NY	-10.83
07/07	DOWLING COLLEGE BURSAR 631-2449013 NY	2,584.00
07/08	RONKONKOMA MART INC RONKONKOMA NY	62.83
07/14	ISLAND EMPANADA 631-617-6427 NY	13.35
07/15	WORLD GYM 631-467-2122 NY	10.00
07/15	WORLD GYM 631-467-2122 NY	19.00
07/19	LOCAL COLOR HAVEN SITE ST THOMAS	125.75
07/20	RON JON SURF SHOP TURKS & CAICO	52.90

This Statement is a Facsimile - Not an original

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Page 1 of 2

06815 MA MA 43498 [REDACTED]

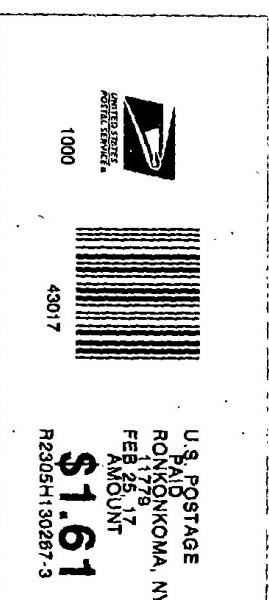
(12)

STTELLER
80 John Bondarenko Ave
Ronkonkoma NY 11779

DOWLING COLLEGE CASE ADMINISTRATION

c/o GCG

P.O. Box 10342
DUBLIN, OH 43017-5542



CLAIM NO. 431

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor:	Case No.
Dowling College	16-75545



Your Claim Is Scheduled As Follows:

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200849268 01000245



**ANTHONY MONZON-ZAIKOWSKI
130 JACKIE COURT
PATCHOGUE NY 11772**

CRT



**CLERK --
U.S. BANKRUPTCY
EASTERN DISTRICT
NEW YORK**

CLERK -
IN BANKRUPTCY
ERN DISTRICT
NEW YORK

2017 MAR. 10. F

RECEIVED

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

FILED - 00431
EASTERN DISTRICT OF NEW YORK
DOWLING COLLEGE
16-75545/HONORABLE JUDGE ROBERT E. GROSSMAN

Proof of Claim

Official Form 410*

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Fillers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents:** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1.	Who is the current creditor?	<u>Anthony Vincenzo Monzon-Zajkowski</u>		
	Name of the current creditor (the person or entity to be paid for this claim)			
	Other names the creditor used with the debtor <u>Anthony Monzon</u> , <u>Anthony Vincenzo Monzon</u>			
2.	Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?		
3.	Where should notices and payments to the creditor be sent?	<input type="checkbox"/> Where should notices to the creditor be sent?	<input type="checkbox"/> Where should payments to the creditor be sent? (if different)	
	<u>Anthony Vincenzo Monzon-Zajkowski</u>		Name	
	Name			
	<u>130 Jackie Court</u>	Number	Street	
	Number	Street		
	<u>Patchogue</u>	<u>NY</u>	<u>11772</u>	
	City	State	ZIP Code	
	<u>(631) 627-0675</u>		Contact phone	
			Contact phone	
	<u>anthony.monzon@gmail.com</u>		Contact email	
4.	Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known)		
		Filed on _____		MM/DD/YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?		


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____	
7. How much is the claim?	\$ <u>31,854</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>The additional cost of finishing my education that I was on track to complete at Dowling</u>	
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: _____ <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)	
	Value of property: \$ _____	
	Amount of the claim that is secured: \$ _____	
	Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)	
	Amount necessary to cure any default as of the date of the petition: \$ _____	
	Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____	
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	
	Amount entitled to priority	
	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____	
	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____	
	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____	
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____	
	<input checked="" type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ <u>31,854</u>	
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____	

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.


Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 03/09/2017
MM / DD / YYYY

Anthony Monzon
Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Anthony</u>	<u>Vincenzo</u>	<u>Monzon Zaikowski</u>
	First name	Middle name	Last name

Title _____

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 130 Jackie Court
Number Street
Patchogue NY 11772
City State ZIP Code

Contact phone (631) 627-0675 Email anthony.monzon@gmail.com

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. IF BY HAND OR OVERNIGHT COURIER: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 410**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.**
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display one or more pages of your proof of claim on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form.

TO: United States Bankruptcy Court
Eastern District of New York

FROM: Anthony Vincenzo Monzon-Zaikowski
130 Jackie Court
Patchogue, NY 11772
(631) 627-0675

RE: Case No. 16-75545 (REG)
Chapter 11
Debtor: Dowling College

ADDITIONAL INFORMATION RELATED TO PROOF OF CLAIM

At the time of Dowling College's closure, I was enrolled as a double major in psychology and biology. The school's closure put me in a situation where I was unable to fulfill the requirements for the biology portion of my degree and was forced to walk away with only a B.A. in psychology. In addition, I was unable to complete my course of study in the pre-professional health program at Dowling College and had to enroll at the SUNY College at Old Westbury in order to finish the prerequisite courses that are needed to matriculate in medical schools in the United States. The length of time necessary in order for me to complete the educational program that I was on track to finish at Dowling College was increased by a full semester due to limitations on transfer credits (approximately 60 of my credits did not transfer) and varying course requirements between the two schools. Other schools that I applied to transfer to would have put me in a similar or worse situation.

While at Dowling College, I was entitled to tuition remission due to my mother's (Lori Anne Zaikowski) employment there as a member of the faculty. Since I am not eligible for free tuition at the SUNY College at Old Westbury, the cost of completing my education must now be paid out of pocket and through federal student loans that will accrue interest for years to come. Additionally, in order to pursue my educational goals at the SUNY College at Old Westbury I needed to quit my job and leave home to live on campus since I do not own a vehicle and there is limited public transportation from Patchogue, where my permanent address is, to Old Westbury. The total cost of completing my education at the SUNY College at Old Westbury, that I would not have had been subject to at Dowling College, is \$31,854. That figure accounts for the personal cost to me for tuition, fees, housing, a mandatory meal plan, and lost income over the one and a half year period necessary to finish the educational trajectory that I was on track to complete at Dowling College at the time of its closure.

Furthermore, Dowling College's sudden closure negatively impacts the strength of my medical school application that I plan to submit in 2018. Medical schools expect letters of recommendation from the pre-professional health committee at the applicant's undergraduate institution and/or letters of recommendation from professors who taught the applicant. The years that I spent developing relationships with the professors at Dowling College will likely yield me nothing in terms of recommendation letters since the pre-professional health committee has been dissolved and the school is defunct. While I can acquire the necessary letters from my current school, the recommendations will not have the depth that they would have had coming from Dowling College, due to my shorter course of study at my current institution.

I am requesting fair consideration during these bankruptcy proceedings due to the negative financial, academic, and personal effects that Dowling College's sudden closure had on me.

Respectfully,



Anthony Vincenzo Monzon-Zaikowski

a Employee's social security number 102-80-2240	1 Wages, tips, other comp 2533.05	2 Federal income tax withheld 10.00
b Employer ID number (EIN) 11-2722873	3 Social security wages 2533.05	4 Social security tax withheld 157.06
c Employer's name, address, and ZIP code DR. JAMES DINOVIS, D.P.M. 1 NEEL COURT SAYVILLE NY 11782	5 Medicare wages and tips 2533.05	6 Medicare tax withheld 36.73
d Control number 369941		
e Employee's name, address, and ZIP code ANTHONY MONZON-ZAIKOWSKI 396 BAYPORT AVE BAYPORT NY 11705		
7 Social security tips 10 Dependent care benefits 12b 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	8 Allocated tips 11 Nonqualified plans 12c 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	9 12a See instructions for box 12 12d 17 State income tax 20 Locality name
NY 112722873	2533.05	4.55
15 State Employer's state I.D. # 18 Local wages, tips, etc.	16 State wages, tips, etc 19 Local income tax	17 State income tax 20 Locality name

Copy B To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service
DXA

Dept. of the Treasury - IRS

This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it

OMB No. 1545-0008 Form W-2 Wage and Tax Statement 2016

a Employee's social security number 102-80-2240	1 Wages, tips, other comp 2533.05	2 Federal income tax withheld 10.00
b Employer ID number (EIN) 11-2722873	3 Social security wages 2533.05	4 Social security tax withheld 157.06
c Employer's name, address, and ZIP code DR. JAMES DINOVIS, D.P.M. 1 NEEL COURT SAYVILLE NY 11782	5 Medicare wages and tips 2533.05	6 Medicare tax withheld 36.73
d Control number 369941		
e Employee's name, address, and ZIP code ANTHONY MONZON-ZAIKOWSKI 396 BAYPORT AVE BAYPORT NY 11705		
7 Social security tips 10 Dependent care benefits 12b 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	8 Allocated tips 11 Nonqualified plans 12c 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	9 12a See instructions for box 12 12d 17 State income tax 20 Locality name
NY 112722873	2533.05	4.55
15 State Employer's state I.D. # 18 Local wages, tips, etc.	16 State wages, tips, etc 19 Local income tax	17 State income tax 20 Locality name

Copy C For EMPLOYEE'S RECORDS (See Notice on back.)

Dept. of the Treasury - IRS

DXA

a Employee's social security number 102-80-2240	1 Wages, tips, other comp 2533.05	2 Federal income tax withheld 10.00
b Employer ID number (EIN) 11-2722873	3 Social security wages 2533.05	4 Social security tax withheld 157.06
c Employer's name, address, and ZIP code DR. JAMES DINOVIS, D.P.M. 1 NEEL COURT SAYVILLE NY 11782	5 Medicare wages and tips 2533.05	6 Medicare tax withheld 36.73
d Control number 369941		
e Employee's name, address, and ZIP code ANTHONY MONZON-ZAIKOWSKI 396 BAYPORT AVE BAYPORT NY 11705		
7 Social security tips 10 Dependent care benefits 12b 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	8 Allocated tips 11 Nonqualified plans 12c 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	9 12a See instructions for box 12 12d 17 State income tax 20 Locality name
NY 112722873	2533.05	4.55
15 State Employer's state I.D. # 18 Local wages, tips, etc.	16 State wages, tips, etc 19 Local income tax	17 State income tax 20 Locality name

Copy 2 To be Filed With Employee's State, City,
or Local Income Tax Return
DXA

Dept. of the Treasury - IRS

a Employee's social security number 102-80-2240	1 Wages, tips, other comp 2533.05	2 Federal income tax withheld 10.00
b Employer ID number (EIN) 11-2722873	3 Social security wages 2533.05	4 Social security tax withheld 157.06
c Employer's name, address, and ZIP code DR. JAMES DINOVIS, D.P.M. 1 NEEL COURT SAYVILLE NY 11782	5 Medicare wages and tips 2533.05	6 Medicare tax withheld 36.73
d Control number 369941		
e Employee's name, address, and ZIP code ANTHONY MONZON-ZAIKOWSKI 396 BAYPORT AVE BAYPORT NY 11705		
7 Social security tips 10 Dependent care benefits 12b 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	8 Allocated tips 11 Nonqualified plans 12c 13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay 14 Other	9 12a See instructions for box 12 12d 17 State income tax 20 Locality name
NY 112722873	2533.05	4.55
15 State Employer's state I.D. # 18 Local wages, tips, etc.	16 State wages, tips, etc 19 Local income tax	17 State income tax 20 Locality name

Copy 2 To be Filed With Employee's State, City,
or Local Income Tax Return
DXA

Dept. of the Treasury - IRS

Account Activity

https://owepay.oldwestbury.edu/C21466_tsa/web/current_activity.jsp

Logged in as Anthony V Monzon-Zajkowski

**Account Activity**View transactions by term: **Authorized Financial Aid**

Currently you do not have pending financial aid for the selected term.

Account Activity

To sort, click on the desired column header.

Description	Code	Date	Amount (\$)
CHARGE	CHRG	25-FEB-2017	-\$1,066.36
CASH	CASH	30-JAN-2017	-\$5.00
PAPR CHRG (PAPER CHARGE)	PAPR	30-JAN-2017	\$5.00
CHARGE	CHRG	26-JAN-2017	-\$1,066.37
DIRECT LENDING-UNSUB1	DUN1	18-JAN-2017	-\$3,463.00
DIRECT LENDING-SUB1	DSU1	18-JAN-2017	-\$2,721.00
OWTPP-TIME PP	TPFE	04-JAN-2017	\$25.00
CHARGE	CHRG	04-JAN-2017	-\$1,089.77
Meal Plan C	ME-C	29-NOV-2016	\$1,860.00
DORM	DORM	29-NOV-2016	\$3,650.00
TUITION	TUIT	07-NOV-2016	\$3,235.00
ST/ACTFEE	STAF	07-NOV-2016	\$87.50
COL. FEE	CFEE	07-NOV-2016	\$12.50
TRANSPORTATION FEE	TRSP	07-NOV-2016	\$50.00
TECH FEE	TECH	07-NOV-2016	\$162.50
Lab Fee	LABF	07-NOV-2016	\$30.00
ATHL.FEE	ICAF	07-NOV-2016	\$174.00
HLTH.SERV.	HSVF	07-NOV-2016	\$120.00
Term Balance:			\$0.00
Term Balance Including Authorized Aid:			\$0.00

Logged in as: Anthony V. Monzon-Zajkowski



Account Activity

View transactions by term: Fall 2016 \$0.00

Authorized Financial Aid

Currently you do not have pending financial aid for the selected term.

Account Activity

To sort, click on the desired column header.

Description	Code	Date	Amount (\$)
C/A DEP.	CADD	25-AUG-2016	\$25.00
COL. FEE	CFEE	25-AUG-2016	\$12.50
MO 23638969348	CHCK	03-AUG-2016	-\$50.00
CHARGE	CHRG	20-OCT-2016	-\$216.84
CHARGE	CHRG	30-AUG-2016	-\$3,145.66
DD DEP	DDD	25-AUG-2016	\$50.00
DORM	DORM	25-AUG-2016	\$3,650.00
DIRECT LENDING-SUB1	DSU1	09-SEP-2016	-\$2,721.00
DIRECT LENDING-UNSUB1	DUN1	09-SEP-2016	-\$3,463.00
HLTH.SERV.	HSVF	25-AUG-2016	\$120.00
ATHL.FEE	ICAF	25-AUG-2016	\$174.00
KEY DEP	KEYD	25-AUG-2016	\$25.00
Lab Fee	LABF	25-AUG-2016	\$60.00
LATE PAY CHARGE	LPAY	05-OCT-2016	\$50.00
M/B DEP	MAIL	25-AUG-2016	\$10.00
Meal Plan C	ME-C	25-AUG-2016	\$1,860.00
ST/ACTFEE	STAF	25-AUG-2016	\$87.50
TECH FEE	TECH	25-AUG-2016	\$162.50
OWTPP-TIME PP	TPFE	30-AUG-2016	\$25.00
TRANSPORTATION FEE	TRSP	25-AUG-2016	\$50.00
TUITION	TUIT	25-AUG-2016	\$3,235.00
Term Balance:			\$0.00
Term Balance Including Authorized Aid:			\$0.00

ORIGIN ID: COPA (631) 470-5153
ATTN: SIMON MARCUS
US BANKRUPTCY COURT-EASTERN DIST.
CENTRAL SPLIT
280 FEDERAL PLAZA
CENTRAL ISLIP NY 11722
UNITED STATES US

SHIP DATE: 07DEC16
ACT WGT: 1.00 LB
C&D: 1000086143NET3780

To DOWLING COLLEGE CASE ADMINISTRATION

C/O GCG

5151 BLAZER PARKWAY

SUITE A

DUBLIN OH 43017

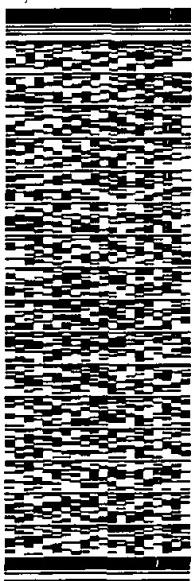
(888) 404-8013

REF: DCO

PO:

DEPT:

RMA:



544J1/D42F/14EB

TRK#

0221 7905 9455 4546

RETURNS MON-FRI
STANDARD OVERNIGHT

OH-US

43017

1. Select the 'Print' button to print 1 copy of each label.
2. The Return Shipment instructions, which provide your recipient with information on the returns process, will be printed with the label(s).
3. After printing, select your next step by clicking one of the displayed buttons.

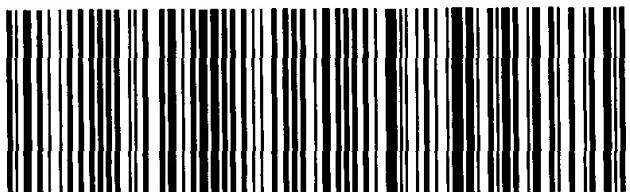
Note: To review or print individual labels, select the Label button under each label image above.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

FedEx.
TRK# 0221 7905 9455 4546

MON - 13 MAR AA
STANDARD OVERNIGHT

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LCK



FID 768862 10MAR17 ISPA 546C4/7965/0CBA

CLAIM NO. 291

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Dowling College	Case No. 16-75545
------------------------------------	----------------------

* P - D C O - P O C / 1 *

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Your Claim is Scheduled As Follows:

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	ANTONIO AGARWAL		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	4 No		
	Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	ANTONIO AGARWAL		
	Name _____	Name _____	
	23 6TH ST		
	Number _____ Street _____	Number _____ Street _____	
	GARDEN CITY PARK, NY 11040		
	City _____	State _____	ZIP Code _____
	City _____ State _____ ZIP Code _____		
	Contact phone _____	Contact phone _____	
	Contact email _____		
4. Does this claim amend one already filed	4 No	Filed on _____ MM/DD/YYYY	
	Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proo of claim for this claim?	4 No		
	Yes. Who made the earlier filing? _____		

* P - D C O - P O C / 2 *

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim?	\$ 128,996.00	Does this amount include interest or other charges? <input checked="" type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Could not find same program elsewhere, Had to choose different field of study, which added additional costs.	
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No Yes. The claim is secured by a lien on property: Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____	
	Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).	
	Value of property: \$ _____	
	Amount of the claim that is secured: \$ 32,249.00	
	Amount of the claim that is unsecured: \$ 32,249.00 (The sum of the secured and unsecured amounts should match the amount in line 7.)	
	Amount necessary to cure any default as of the date of the petition: \$ _____	
	Annual Interest Rate (when case was filed) _____ Fixed Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No Yes. Identify the property: _____	
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Check all that apply:	Amount entitled to priority _____
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.		<input checked="" type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ 32,249.00
		<input checked="" type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____
		<input checked="" type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____
		<input checked="" type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____
		<input checked="" type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____
		<input checked="" type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

* P - D C O - P O C / 3 *

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files
fraudulent claim could be
fined up to \$500,000
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 03/02/2017

MM / DD / YYYY

Antonio J Agarwal

Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Antonio J Agarwal</u>		
	First name	Middle name	Last name
Title			
Company	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	Number	Street	
	<u>23 6th Street</u>		
	City	State	ZIP Code
Contact phone	(516) 477-9115	Email	<u>johnnyjagarwal@yahoo.com</u>

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

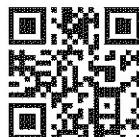
A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party** who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
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- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

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Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

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Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form

Keep this stub with your personal records. The other side contains important information.

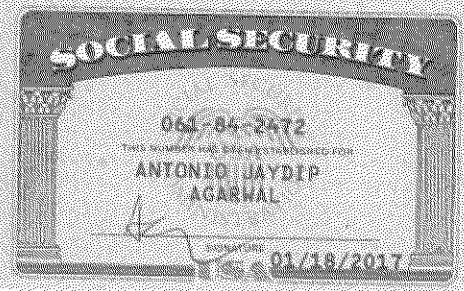
Please note: The date we issued this card is shown below the signature line.

ANTONIO JAYDIP AGARWAL
23 6TH STREET
GARDEN CITY PARK NY 11040-4109

YOUR SOCIAL SECURITY CARD

ADULTS: Sign this card in ink immediately.
CHILDREN: Do not sign until age 18 or your first job,
whichever is earlier.

Keep your card in a safe place to prevent loss or theft.
DO NOT CARRY THIS CARD WITH YOU.
Do not laminate.



Your 2016 tax form is now available. Need more information about tax forms? Find it here.

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Welcome, Anthony | Log Out

[Apply for New Loan](#)

Getting Ready for Next Semester?



We're Ready to Help You Again with the Smart Option Student Loan®

[Get Started](#)

Loan Summary

\$128,995.54

Sort by [Balance](#) ▾

Total Current Balance(s)

Balances as of 03/02/2017 05:52 AM ET

Sallie Mae Smart Option Student Loan #2085 - For Dowling College

Auto Debit: Not Enrolled

In School - Fixed Repayment Option (estimated principal & interest payment due date 12/04/2019)

\$48,922.10

Current Balance

7.625%

Interest Rate

03/02/2017



\$.00

Payment Date

Due 03/04/2017

Payment Amount

[View details](#)

Sallie Mae Smart Option Student Loan #3482 - For Dowling College

Auto Debit: Not Enrolled

In School - Fixed Repayment Option (estimated principal & interest payment due date 12/04/2019)

\$48,334.27

Current Balance

10.250%

Interest Rate

03/02/2017



\$.00

Payment Date

Due 03/04/2017

Payment Amount

[View details](#)

Sallie Mae Smart Option Student Loan #7885 - For Dowling College

Auto Debit: Not Enrolled

In School - Fixed Repayment Option (estimated principal & interest payment due date 12/04/2019)

\$31,739.17

Current Balance

9.375%

Interest Rate

03/02/2017



\$.00

Payment Date

Due 03/04/2017

Payment Amount

[View details](#)

I am making a payment of:

\$0.00[Make Payment](#)

- Need a Loan for Next Semester? The Smart Option Student Loan® [Get Started](#)

Recent Activity

[View History for older transactions](#)

No Activity

[Payment Status Information](#)

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[Repayment Options](#)

[Cosigner Responsibilities & Release Information](#) 

[Military Benefits](#) 

[Pay and Manage Your Loan](#) 

[Repayment Calculator](#) 

[Online Account Overview](#) 

[Beware of Debt Relief Offers](#) 

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[View your free quarterly FICO®Score online](#)

- Available for borrowers and cosigners with eligible loans
- Get access to the key factor(s) affecting your score

[See Your Score Now](#)



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SLM Corporation and its subsidiaries, including Sallie Mae Bank and Upromise, Inc., are not sponsored by or agencies of the United States of America.

CLAIM NO. 496

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Case No.
Dowling College 16-75545



IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200851402 01000267



ARIEL LAVALLE
224 GERARD RD
YAPHANK NY 11980-9630

Garden City Group, LLC
MAR - 8 2018

FILED - 00496

EASTERN DISTRICT OF NEW YORK

DOWLING COLLEGE

16-75545/HONORABLE JUDGE ROBERT E. GROSSMAN

Proof of Claim

Official Form 410*

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Ariel LaValle</u>		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	<u>Ariel LaValle</u>		<u>Where should payments to the creditor be sent? (if different)</u>
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name	
	<u>224 Gerard Rd</u>		
	Number Street	Number Street	
	<u>Yaphank</u>	<u>NY</u>	<u>11980</u>
	City State ZIP Code	City State ZIP Code	
	<u>631-2864278</u>	Contact phone	_____
		<u>Ariel.E.LaValle@gmail.com</u>	Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No	Filed on _____ MM/DD/YYYY	
	<input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes. Who made the earlier filing? _____	


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6.	Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____														
7.	How much is the claim? \$ <u>2000</u>	Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).														
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Invitation - Items left at school never returned.</u>														
9.	Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).														
	Value of property:	\$ _____														
	Amount of the claim that is secured:	\$ _____														
	Amount of the claim that is unsecured:	\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)														
	Amount necessary to cure any default as of the date of the petition:	\$ _____														
	Annual Interest Rate (when case was filed)	% <input type="checkbox"/> Fixed <input type="checkbox"/> Variable														
10.	Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____														
11.	Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____														
12.	Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. <table border="1"> <thead> <tr> <th style="text-align: left;"></th> <th style="text-align: right;">Amount entitled to priority</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.</td> <td style="text-align: right;">\$ _____</td> </tr> </tbody> </table>		Amount entitled to priority	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.	\$ _____
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* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.


Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157; and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 3-5-2018
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

Ariel E Lavalle

First name

E

Last name

Title

Student

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

224 Gerard Rd.

Number

Street

Yaphank NY 11980

City

State

ZIP Code

Contact phone

(631) 902 1615

Email arielle.lavalle@gmail.com

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Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display one or more pages of your proof of claim on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim will be displayed over the Internet.

Offers to purchase a claim

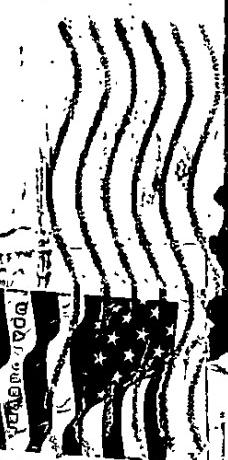
Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form.

Ariel Lavante
1224 Gerard Rd
Yaphank, NY 11980

MID-ISLAND NY 117

05 MAR 2018 PM 1 L



Dowling College Case Administration
c/o GC3
P.O. Box 10342
Dublin, OH 43017-5542

CLAIM NO. 224

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Dowling College	Case No. 16-75545
------------------------------------	----------------------

* P - D C O - P O C / 1 *

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Your Claim is Scheduled As Follows:

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	BRITTANY O'NEILL		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	4 No		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	BRITTANY O'NEILL		
	Name 460-2A OLD TOWN RD	Name	
	Number PORT JEFF STATION, NY 11776	Number Street	
	City (631) 509-1692	City State ZIP Code	
	Contact phone BRITT.ONEILL@YAHOO.COM	Contact phone _____	
	Contact email BRITT.ONEILL@YAHOO.COM	Contact email _____	
4. Does this claim amend one already filed	4 No	Filed on _____ MM/DD/YYYY	
	Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proo of claim for this claim?	4 No	Yes. Who made the earlier filing? _____	

* P - D C O - P O C / 2 *

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	No	⁴ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>5 5 4 5</u>
7. How much is the claim?	<u>\$ 6,519.98</u>	Does this amount include interest or other charges? ⁴ No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Sallie Mae student loans	
9. Is all or part of the claim secured?	⁴ No Yes. The claim is secured by a lien on property.	Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____
Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).		
Value of property: \$ _____ Amount of the claim that is secured: \$ <u>0.00</u> Amount of the claim that is unsecured: \$ <u>6,519.98</u> (The sum of the secured and unsecured amounts should match the amount in line 7.)		
Amount necessary to cure any default as of the date of the petition: \$ _____		
Annual Interest Rate (when case was filed) _____ Fixed Variable		
10. Is this claim based on a lease?	⁴ No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
11. Is this claim subject to a right of setoff?	⁴ No Yes. Identify the property: _____	
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	⁴ No Yes. Check all that apply:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.		Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____
		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____
		Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____
		Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____
		Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____
		Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

* P - D C O - P O C / 3 *

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files
fraudulent claim could be
fined up to \$500,000
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/21/2017

MM / DD / YYYY

Brittany O'Neill

Signature

Print the name of the person who is completing and signing this claim:

Name

Brittany O'Neill

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

460 2A Old Town Road

Number Street

PORT JEFFERSON STATION, NY 11776

City

State

ZIP Code

Contact phone

(631) 509-1692

Email **britt.oneill@yahoo.com**

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

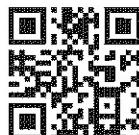
A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party** who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. § 507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. § 506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form



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Loan Details

[Loan Details](#)[Loan History](#)**Dowling College**[Documents & Tax Forms](#)**Sallie Mae Smart Option St**

Repayment Start Date:

11/20/2017

Estimated Pay-Off Date:

10/26/2023

\$6,519.98

Current Balance

Balances as of 02/21/2017 06:22 AM ET

7.875%

Interest Rate

Loan Details

Status: In School – Interest Repayment Option**Cosigner:** Christine O'Neill**Approved Loan Amount:** \$6,510.00**Maximum Repayment Term:** Up to 72 Months**First Disbursement Date:** 01/20/2016

Payment Information

Monthly Payment Amount: \$42.63**Current Amount Due Date:** 02/21/2017**Last Payment Received:** \$41.28**Last Payment Date:** 01/21/2017**Automatic Debit:** Enrolled**Past Due Amount:** \$0.00**Number Of Days Past Due:** 0

Disbursement Details

Date	Amount	Status
Jan 20, 2016	\$6,510.00	Disbursed

[Return to Loan Summary](#)

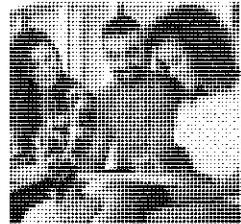
Staying on Top of Your Credit Just Got Easier
View your free quarterly FICO®Score online

Let's Make College HappenSM with Another Smart
Option Student Loan®

- Available for borrowers and cosigners with eligible loans
- Get access to the key factor(s) affecting your score

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- No origination fee

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Getting Ready for Next Semester?
We're Ready to Help You Again with the Smart Option Student Loan®

[Get Started](#)

Loan Summary

Balances as of 02/21/2017 06:22 AM ET

Sallie Mae Smart Option Student Loan #0792 - For Dowling College

[Auto Debit: Enrolled](#) !

In School - Interest Repayment Option (estimated principal & interest payment due date 12/21/2017)

\$6,519.98

Current Balance

7.875%

Interest Rate

02/22/2017

Payment Date

Due 02/21/2017

\$

Payment Amount

[View details](#)

I am making a payment of:

\$42.63

[Make Payment](#)

- Need a Loan for Next Semester? The Smart Option Student Loan® [Get Started](#)

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[View History for older transactions](#)

No Activity

[Payment Status Information](#)

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- Get access to the key factor(s) affecting your score

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[Repayment Calculator](#)

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Transaction History

Balances as of 02/21/2017 06:22 AM ET

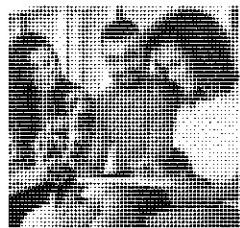
Date	Loan	Type	Amount	Fees	Interest	Principal
1/26/2017	#0792	Accrued Interest	\$8.51	\$0.00	\$8.51	\$0.00
1/21/2017	#0792	Auto Debit Payment	\$41.28	\$0.00	(\$41.28)	\$0.00
1/21/2017	#0792	Accrued Interest	\$0.00	\$0.00	\$34.95	\$0.00
12/26/2016	#0792	Accrued Interest	\$8.13	\$0.00	\$8.13	\$0.00
12/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$32.49	\$0.00
12/21/2016	#0792	Auto Debit Payment	\$41.28	\$0.00	(\$41.28)	\$0.00
11/26/2016	#0792	Accrued Interest	\$8.13	\$0.00	\$8.13	\$0.00
11/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$33.84	\$0.00
11/21/2016	#0792	Auto Debit Payment	\$41.28	\$0.00	(\$41.28)	\$0.00
10/26/2016	#0792	Accrued Interest	\$8.13	\$0.00	\$8.13	\$0.00
10/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$32.49	\$0.00
10/21/2016	#0792	Auto Debit Payment	\$41.28	\$0.00	(\$41.28)	\$0.00
9/26/2016	#0792	Accrued Interest	\$8.13	\$0.00	\$8.13	\$0.00
9/21/2016	#0792	Auto Debit Payment	\$41.28	\$0.00	(\$41.28)	\$0.00
9/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$33.84	\$0.00
8/26/2016	#0792	Accrued Interest	\$8.04	\$0.00	\$8.04	\$0.00
8/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$33.29	\$0.00

8/21/2016	#0792	Auto Debit Payment	\$40.60	\$0.00	(\$40.60)	\$0.00
7/26/2016	#0792	Accrued Interest	\$8.00	\$0.00	\$8.00	\$0.00
7/21/2016	#0792	Auto Debit Payment	\$40.60	\$0.00	(\$40.60)	\$0.00
7/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$31.96	\$0.00
6/26/2016	#0792	Accrued Interest	\$8.00	\$0.00	\$8.00	\$0.00
6/21/2016	#0792	Auto Debit Payment	\$41.95	\$0.00	(\$41.95)	\$0.00
6/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$33.29	\$0.00
5/26/2016	#0792	Accrued Interest	\$8.26	\$0.00	\$8.26	\$0.00
5/21/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$33.02	\$0.00
5/21/2016	#0792	Auto Debit Payment	\$41.85	\$0.00	(\$41.85)	\$0.00
4/27/2016	#0792	Payment	\$42.00	\$0.00	(\$42.00)	\$0.00
4/26/2016	#0792	Accrued Interest	\$42.66	\$0.00	\$42.66	\$0.00
3/26/2016	#0792	Accrued Interest	\$11.02	\$0.00	\$11.02	\$0.00
3/19/2016	#0792	Payment	\$42.00	\$0.00	(\$42.00)	\$0.00
3/19/2016	#0792	Accrued Interest	\$0.00	\$0.00	\$28.89	\$0.00
2/26/2016	#0792	Accrued Interest	\$23.40	\$0.00	\$23.40	\$0.00

Let's Make College HappenSM with Another Smart Option Student Loan®

- Multiple Repayment options
- Competitive interest rates
- No origination fee

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CLAIM NO. 272

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Case No.
Dowling College 16-75545



IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200864594 01000398



CAMELLA FEMOYER
35 BEDFORD AVE
PORT JEFFERSON STATION NY 11776

FILED - 00272
EASTERN DISTRICT OF NEW YORK
DOWLING COLLEGE
16-75545/HONORABLE JUDGE ROBERT E. GROSSMAN



If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410*

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Camella Femoyer</u> Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>Camella Femoyer</u> Name 35 Bedford Ave Number Street Port Jefferson Sta N.Y. 11776 City State ZIP Code	<u>Camella Femoyer</u> Name 35 Bedford Ave Number Street Port Jefferson Sta N.Y. 11776 City State ZIP Code	Where should payments to the creditor be sent? (if different) Name Street City State ZIP Code
	<u>631-428-6163</u> Contact phone	<u>631-428-6163</u> Contact phone	
	<u>iicammy99@Aim.com</u> Contact email		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ MM/DD/YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____							
7. How much is the claim?	\$ <u>33,360 00</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).						
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.							
<i>Claim is due to Dorrings expense - As a Softball Player she needed to Dorn - I lost 6 semesters of Dorn. I new school does not offer</i>								
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____							
	Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)							
	Value of property: \$ _____							
	Amount of the claim that is secured: \$ _____							
	Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)							
	Amount necessary to cure any default as of the date of the petition: \$ _____							
	Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable							
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____							
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____							
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. <table border="0"> <tr> <td><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)____ that applies. \$ _____</td> </tr> </table>		<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)____ that applies. \$ _____
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____								
<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____								
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____								
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____								
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____								
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)____ that applies. \$ _____								

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.


Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/19/2017
MM/DD/YYYY


Signature

Print the name of the person who is completing and signing this claim:

Name

First name	Middle name	Last name
------------	-------------	-----------

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number	Street
--------	--------

City	State	ZIP Code
------	-------	----------

Contact phone

Email _____

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
 THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 410**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.
- A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.
- For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian. For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display one or more pages of your proof of claim on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form.

To Whom It May Concern,

Please find enclosed a claim form filled out by me, Camella Femoyer, residing at 35 Bedford Ave Port Jefferson Station New York 11776.

I've also enclosed a bill from Dowling College during my Freshman Year. I've highlighted the expenses associated with my claim. My claim is due for the following reason. I was asked to play for the Dowling Softball Team. Because Dowling was a Division 2 college the practice schedule was going to be often, twice a day, early morning and afternoon, 6 days a week. This schedule along with my academic schedule required me to dorm.

Because of Dowling's inability to manage the college efficiently not only did I lose out on going to the college I wanted to go to along with playing for the team I wanted to play for I lost my opportunity to dorm. The college I had to transfer to does NOT have dorming facilities. Because of this, I am required to drive back (home) and forth(school) anywhere between 2 to 6 times a day. I am attending St. Joseph's college which is 22 miles round trip. That's 22, 44 or 66 miles a day plus wear and tear. My claim is for the remaining portion of what I would have been dorming (3 years or til graduation) for had the college not closed. Because of Dowling's inability to manage the college efficiently I was forced to go to a school that I didn't want to go to and not play for their Softball team. This adds up to nearly 400 miles a week, gas, wear and tear, extra travel time for the next 3 years.

Thank You

Camella Femoyer

Licammy99@aim.com

Case # 16-75545

Claimant # 01000398

Control # 7316173161

Journal of Oral Rehabilitation 2003 30: 1023–1030

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The 2003 edition of the *Handbook* is the first to include a section on the effects of climate change on water resources.

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Section 11 - Summary

1975(2) 33 (Suppl.)

07/06/2015

Dowling College
STUDENT SCHEDULE/BILL
Fall 2015 (201509)

CRN	SUBJ	CRSE	COURSE TITLE	LV
90033	ENG	1001A	Principles of Writing (EI)	01
90110	MTH	1014A	Pre-Calculus (EI)	01
90382	SOC	2101C	Self & Soc I:Fnd Social Theory	01
93948	EDH	1021A	Education in Society	01
94055	FYE	1025A	Philosophy of Humanistic Edu.	01

CHARGES		CREDITS/ANTICIPATED CREDITS	
Oakdale Housing Activity Fee	40.00	Housing Deposit Check	200.00
Oakdale Residence Hall	4185.00	Outside Scholarship Payment	3500.00
Oakdale Resident Meal Plan	1375.00	Tuition Deposit Vis	225.00
Residential Health Insurance	3195.00	Visa Pmt - Thank you	4500.00
Security Damage Charge Oakdale	200.00	Direct Loan - Subsidized	1732.00
Undergraduate Tuition	14550.00	Direct Loan - Unsubsidized	990.00
		Direct Parent PLUS Loan	5982.00
		Alumni Sponsorship Grant Under	250.00
		Long Island Award	1000.00
		Sibling Scholarship - U/G	750.00
		Vanderbilt A Scholarship	3000.00

* * * CONTINUED ON NEXT PAGE * * *

Camella M. Femoyer
Student ID: 900622913
Campus: 1
Total Current Term Charges: 23545.00
Total Current Term Credits: 22129.00

Previous/Other Term Balance: -225.00
Current Term Balance: 1416.00
AMOUNT DUE: 1191.00
Future Balance: 0.00

----- Return Bottom Portion With Payment -----

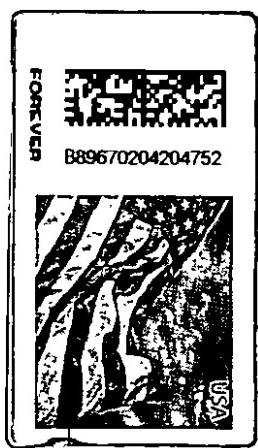
Camella M. Femoyer
35 Bedford Ave
Port Jefferson Stati, NY 11776

Student ID: 900622913
Term: 201509
DATE DUE: 06-JUL-2015
AMOUNT DUE: 1191.00

Amount Paid: \$ _____

Carmella Fenoyer
35 Bedford Ave
Port Jefferson Sta.
New York 11776

MAILED
NY 11776
25 FEB '17
FM 3 L



Dowling College Case Administration
c/o GCG
P.O. Box 10342
Dublin, OH 43017-5542

CLAIM NO. 217

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Dowling College	Case No. 16-75545
------------------------------------	----------------------

* P - D C O - P O C / 1 *

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Your Claim is Scheduled As Follows:

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	CARL ALLMAN		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	4 No Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? CARL ALLMAN Name 9 GAYNOR ROAD Number Street City State ZIP Code Contact phone (631) 561-1607 Contact email ALLMANCARL@GMAIL.COM	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone _____ Contact email _____	
4. Does this claim amend one already filed	4 No Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proo of claim for this claim?	4 No Yes. Who made the earlier filing? _____		

* P - D C O - P O C / 2 *

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim?	\$ 30,852.00	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.	
Services Performed		
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No	Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____
Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).		
Value of property: \$ _____		
Amount of the claim that is secured: \$ 0.00		
Amount of the claim that is unsecured: \$ 30,852.00 (The sum of the secured and unsecured amounts should match the amount in line 7.)		
Amount necessary to cure any default as of the date of the petition: \$ _____		
Annual Interest Rate (when case was filed) _____ Fixed Variable		
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No	Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No	Yes. Identify the property: _____
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.		Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____
		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____
		Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____
		Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____
		Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____
		Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

* P - D C O - P O C / 3 *

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files
fraudulent claim could be
fined up to \$500,000
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/20/2017

MM / DD / YYYY

carl allman

Signature

Print the name of the person who is completing and signing this claim:

Name	carl allman		
	First name	Middle name	Last name
Title			
Company	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	9 gaynor road		
	Number	Street	
	CENTEREACH, NY		
	City	State	ZIP Code
Contact phone		Email	allmancarl@gmail.com

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

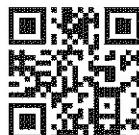
A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party** who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. § 507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. § 506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form

900004725 Carl Allman
Jul 11, 2016 10:15 am

Account Summary



Review summarized charges and payments to your account. Account information includes transcript fees from the registrar, application fees from admissions, payments from financial aid, and others.

Anticipated third party contract payments, financial aid payments, and memo items are **NOT** included in this summary.

Summary

Account Balance: \$0.00

Description	Charge	Payment	Balance
Graduate Tuition	\$0.00	\$0.00	\$0.00
Distance Education MBA	\$30,852.00	\$0.00	\$0.00
Late Fee-Past Due	\$0.00	\$0.00	\$0.00
Bill Charge for Grad Fee	\$100.00	\$0.00	\$0.00
Amex Automated Payment	\$0.00	\$5,142.00	\$0.00
Amex Pmt - Thanks	\$0.00	\$25,810.00	\$0.00
Charges:	\$30,952.00		
Credits and Payments:	\$30,952.00		
Account Balance:	\$0.00		

RELEASE: 8.5.4.4

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CLAIM NO. 201

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor:	Case No.
Dowling College	16-75545



Your Claim Is Scheduled As Follows:

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200869832 01000451



CHELSI SOMWAR
141-32 247ST APT2
ROSEDALE NY 11422

FILED - 00201
EASTERN DISTRICT OF NEW YORK
DOWLING COLLEGE
16-75545/HONORABLE JUDGE ROBERT E. GROSSMAN



If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410*

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill-in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1.	Who is the current creditor?	<u>Chelsi R. Somwar</u>		
Name of the current creditor (the person or entity to be paid for this claim)				
Other names the creditor used with the debtor _____				
2.	Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? <u>Chelsi R. Somwar</u> Name _____ <u>141-32 247st Apt 2</u> Number Street _____ <u>Rosedale N.Y.</u> <u>11422</u> City State ZIP Code _____		
Where should payments to the creditor be sent? <u>Same</u> Name _____ Number Street _____ City State ZIP Code _____				
Contact phone <u>(917) 238-4664</u> Contact phone _____ Contact email <u>r2astar@aol.com</u> Contact email _____				
4.	Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____		
5.	Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>3 6 2 4</u>						
7. How much is the claim?	\$ <u>14956.72</u> Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).						
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>money loaned</u>						
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input checked="" type="checkbox"/> Other. Describe: <u>Fed Loan Servicing</u>						
Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)							
Value of property: \$ _____							
Amount of the claim that is secured: \$ <u>14,956.72</u>							
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)							
Amount necessary to cure any default as of the date of the petition: \$ _____							
Annual Interest Rate (when case was filed) <u>4.29 %</u> <input type="checkbox"/> Fixed <input type="checkbox"/> Variable							
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____						
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____						
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. <table border="0"> <tr> <td><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____</td> </tr> </table>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____
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<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies. \$ _____							

*Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.


Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/16/2017
MM / DD / YYYY

Chelsi R. Somwar
Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Chelsi</u>	<u>R</u>	<u>Somwar</u>
	First name	Middle name	Last name

Title	<u>Miss</u>
-------	-------------

Company	Identify the corporate servicer as the company if the authorized agent is a servicer.		
---------	---	--	--

Address	<u>141-32 247ST Apt 2</u>		
Number	Street		
	<u>Rosedale</u>	<u>N.Y.</u>	<u>11422</u>
City		State	ZIP Code

Contact phone	<u>(917)238-4664</u>	Email	<u>r2astar@aol.com</u>
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IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
 THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 410**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

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Do not file these instructions with your form.



FedLoan Servicing
 P.O. BOX 69184
 Harrisburg, PA 17106-9184
 Toll-free: 800-699-2908
MyFedLoan.org

CHELSI R SOMWAR
 14132 247TH ST APT 2
 ROSEDALE, NY 11422

Account #: ~~382181~~ 4987

February 8, 2017

The following information is provided as verification of the loans we service for CHELSI R SOMWAR:

In School

- The loans listed below are currently In School through 05/23/2021. Repayment will begin, following a 6 month grace period, on 11/24/2021.

Loan #	Disbursement Date	Loan Program	Original Loan Amount	Current Principal Balance	Monthly Payment Amount	Repayment Term	Interest Rate	Days Delinquent
2	08/31/2015	DLSTFD	\$4,500.00	\$4,500.00	**\$16.40	—	4.29%	0
3	08/31/2015	DLUNST	\$4,000.00	\$4,000.00	**\$14.57	—	4.29%	0
4	08/31/2015	DLUNST	\$2,000.00	\$2,000.00	**\$7.29	—	4.29%	0

Important Notes

- Based on your current principal balance and interest rate, your account's total monthly payment amount will be approximately \$38.26.
- ** ESTIMATES only.** The estimate provided is an interest only payment amount. The actual Monthly Payment Amount may be higher than the amount provided. The actual amount and repayment terms will be provided to you in writing before the loan enters repayment.

Account Summary

Main Content

Alerts & Messages

- Your 2016 tax information is now available!

Payment Summary

Type of Payment	Payment Amount & Date	Related Payment Actions
Current Payment Due:	\$0.00	View Billing Details

We have options that can help:

- Change your monthly payment Due Date
- Change to a more affordable Repayment Plan
- Consider Deferment or Forbearance options to temporarily postpone your monthly payment.

Loan Summary

Date	Loan Type	Status	Balance
08/31/2015	Direct Sub Stafford Loan	In School	\$4,500.00
08/31/2015	Direct Unsub Stafford Loan	In School	\$4,000.00
08/31/2015	Direct Unsub Stafford Loan	In School	\$2,000.00
View Loan Details			Total Loan Balance: \$10,500.00

TEACH Grant Summary

Undergraduate TEACH Grants

Award Year	School	Annual Award Amount	Potential Interest
2014 - 2015	Dowling Coll	\$3,760.00	\$379.46

[View TEACH Grant Details](#)

Account Profile

Address:

14132 247TH ST APT 2
ROSEDALE, NY 11422 -2134

Phone:

(917) 238-4664 *primary*
(347) 845-7567 *alternate*

Email:

Rzastar@aol.com

Mortgage Applicants

Getting a Loan Verification Letter to give to your mortgage company is easy.

- - [Learn More](#)
-

Do you work in public service?

You may qualify for the Public Service Loan Forgiveness program.

Reaffirmation Agreement

I have lost eligibility for federal student aid due to "overborrowing".

[Regain Eligibility](#)

View Loan Details

Main Content

Loan Details

Balance Overview

Type of Loan Balance	Loan Balance Amount	Loan Balance Questions
Current Principal Balance:	\$10,500.00	The principal balance includes the original amount you borrowed, plus any applicable loan fees, minus any principal payments.
Unpaid Interest:	\$317.26	This amount does not include accrued interest but may include interest that was capitalized (added to the principal balance) when the loan(s) entered repayment.
Total Current Balance:	\$10,817.26	The amount of unpaid interest that is currently outstanding on your account.

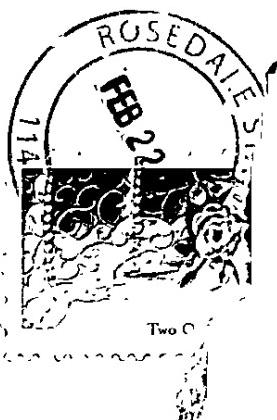
Loan Details

[Print All Loan Details](#)

Date	Loan Type	Status	Balance	Action
08/31/2015	Direct Sub Stafford Loan	In School	\$4,500.00	
08/31/2015	Direct Unsub Stafford Loan	In School	\$4,000.00	
08/31/2015	Direct Unsub Stafford Loan	In School	\$2,000.00	

Chelsi Somwar
141-32 247st Apt 2
Rosedale NY 11422

Dawling College Case Administration
C/o GCG P.O. Box 10342,
Dublin, Ohio 43017-5542



CLAIM NO. 454

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Case No.
Dowling College 16-75545



IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

DCO0200871772 01000471



CHRISTIAN DULAR
41 AVOLET CT
MOUNT SINAI NY 11766



FILED - 00454
EASTERN DISTRICT OF NEW YORK
DOWLING COLLEGE
16-75545/HONORABLE JUDGE ROBERT E. GROSSMAN

Proof of Claim

Official Form 410*

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Christian Dular</u> Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	<input type="checkbox"/> Where notices to the creditor be sent? <u>Christian Dular</u> Name <u>41 Avulet Ct</u> Number Street <u>Mount Sinai NY 11766</u> City State ZIP Code	<input type="checkbox"/> Where payments to the creditor be sent? <u>Christian Dular</u> Name <u>41 Avulet Ct</u> Number Street <u>Mount Sinai NY 11766</u> City State ZIP Code	
	Contact phone _____		Contact phone _____
	Contact email _____		Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No	Filed on _____ MM/DD/YYYY	
	<input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Who made the earlier filing? _____		


Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>7 8 3 3</u>	
7. How much is the claim?	\$ <u>21,500</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Goods Sold / Services</u>	
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____	
	Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)	
	Value of property: \$ _____	
	Amount of the claim that is secured: \$ _____	
	Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)	
	Amount necessary to cure any default as of the date of the petition: \$ _____	
	Annual Interest Rate (when case was filed): _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition: \$ _____	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____	
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply: A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	
	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____	
	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____	
	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____	
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____	
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____	
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a) _____ that applies. \$ _____	

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.


Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 3/10/2017
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

Christian Dowling

First name

Middle name

Last name

Title

Credit Fore

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

41 Avonlet Ct

Number

Street

City

State

ZIP Code

Contact phone

Email

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. IF BY HAND OR OVERNIGHT COURIER: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
 THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 410**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.**
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. § 507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. § 506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display one or more pages of your proof of claim on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

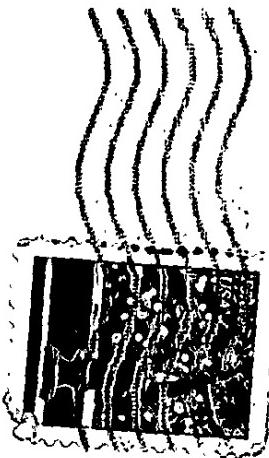
Do not file these instructions with your form.

Christian Deller
44 Airport Ct.
Mt. Simond, NY 116

Dowling College One Administration
P.O. Box 10342
Duluth, OH 43017-5542

MID-ISLAND NY 116

16 MAR 2017 PM 11



CLAIM NO. 420

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK

Name of Debtor: Dowling College	Case No. 16-75545
------------------------------------	----------------------

* P - D C O - P O C / 1 *

IF YOU HAVE SUBMITTED THIS PROOF OF CLAIM FORM ELECTRONICALLY, YOU DO NOT NEED TO SUBMIT THIS FORM. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Your Claim is Scheduled As Follows:

If an amount is identified above, you have a claim scheduled by the Debtor. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Proof of Claim

Official Form 410

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571

This chapter 11 case was commenced in the United States Bankruptcy Court for the Eastern District of NY, on November 29, 2016 (the "Petition Date.") Fill in all the information for the claim as of the Petition Date.

Part 1: Identify the Claim

1. Who is the current creditor?	CHRISTIAN TESSITORE		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	4 No		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	CHRISTIAN TESSITORE		
	Name	Name	
	2041 PINE ST		
	Number Street	Number Street	
	BALDWIN, NY 11510		
	City State ZIP Code	City State ZIP Code	
	Contact phone (516) 491-8727		
	Contact phone _____		
	Contact email CHRIS.TESSITORE@AOL.COM		
	Contact email _____		
4. Does this claim amend one already filed	4 No	Filed on _____ MM/DD/YYYY	
	Yes. Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proo of claim for this claim?	4 No	Yes. Who made the earlier filing? _____	

* P - D C O - P O C / 2 *

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6.	Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7.	How much is the claim?	\$ 55,000.00	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Loss of Div2 Scholarship \$; (\$10,000/yr)Parents loans, No scholoarship \$ now; NOW playing D3 no \$	
9.	Is all or part of the claim secured?	<input checked="" type="checkbox"/> No Yes. The claim is secured by a lien on property: Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . Motor vehicle Other. Describe: _____	
			Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded).
			Value of property: \$ _____
			Amount of the claim that is secured: \$ 0.00
			Amount of the claim that is unsecured: \$ 55,000.00 (The sum of the secured and unsecured amounts should match the amount in line 7.)
			Amount necessary to cure any default as of the date of the petition: \$ _____
			Annual Interest Rate (when case was filed) _____ Fixed Variable
10.	Is this claim based on a lease?	<input checked="" type="checkbox"/> No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
11.	Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No Yes. Identify the property: _____	
12.	Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No Yes. Check all that apply:	Amount entitled to priority
	A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
		Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
		Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
		Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
		Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies.	\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

* P - D C O - P O C / 3 *

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files
fraudulent claim could be
fined up to \$500,000
imprisoned for up to 5
years, or both.
18 U.S.C. §§ 152, 157, and
3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 03/10/2017

MM / DD / YYYY

Elsa Tessitore

Signature

Print the name of the person who is completing and signing this claim:

Name

Elsa Tessitore

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

2041 Pine Street

Number Street

BALDWIN, NY 11510

City

State

ZIP Code

Contact phone

(516) 223-3033

Email **evrt2041@aol.com**

IF SUBMITTING A HARD COPY OF A PROOF OF CLAIM FORM, PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS:
IF BY MAIL: DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, P.O. BOX 10342, DUBLIN, OHIO 43017-5542. **IF BY HAND OR OVERNIGHT COURIER:** DOWLING COLLEGE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

IF YOU ARE SUBMITTING YOUR PROOF OF CLAIM ELECTRONICALLY, YOU WILL RECEIVE AN EMAIL CONFIRMATION OF YOUR CLAIM SUBMISSION. YOU WILL ALSO BE PROVIDED WITH AN ELECTRONICALLY DATE STAMPED PDF OF YOUR CLAIM. YOU MAY PRINT AND RETAIN A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS MARCH 10, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)
THE GOVERNMENTAL BAR DATE IS MAY 30, 2017 AT 5:00 P.M. (PREVAILING EASTERN TIME)

Official Form 41**Instructions for Proof of Claim**

United States Bankruptcy Court

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, Garden City Group, LLC ("GCG"), are not authorized and are not providing you with any legal advice.

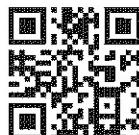
A person who files a fraudulent claim could be fined up to \$500,000 imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157 and 3571.

How to fill out this form

- **Fill in all the information for the claim as of the Petition Date.**
- **If the claim has been acquired from someone else, then state the identity of the last party** who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed
- **Attach any supporting documents to this form.**
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *Redaction* of information in the section below.)
- Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- **Do not attach original documents because attachments may be destroyed after scanning.**
- **If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.**
- **A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth.** See Bankruptcy Rule 9037.
- **For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.** For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed. You will also be able to view the details of your claim and the first page of your *Proof of Claim* form on the claims register hosted on the case administration website, www.gardencitygroup.com/cases/dco.

**Understand the terms used in this form**

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. § 507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Redaction of information: *Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to privacy on the Proof of Claim form and any attached documents.*

Secured claim under 11 U.S.C. § 506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Display of Proof of Claim on Case Administration Website: As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form

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